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ON PROGNOSIS IN INSANITY.

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(Read before Hom. Med. Society of the State of New York.)

Forecasting future events has been deemed solely the work of prophets, soothsayers and sorcerers. Still, all humanity is inclined, more or less, to the art of divination.

This quality of mind, impelling us to seek to lift the veil that shuts out the future, in the ignorant, the uneducated and the unthinking, develops superstition, promotes witchcraft, and breeds marvelous delusions. Among the thoughtful seekers after truth, however, there lies in this quality a stimulus both to profound research among the dusty tomes of the past, and a bold, enthusiastic plunging into the unfolded mysteries of what is yet to come.

Patrick Henry struck the key note of scientific prophecy when he said: "I know of no way of judging the future but by the past."

In this spirit we propose to examine the question of "prognosis in insanity."

Let us premise by stating that the subject is one which is too little understood by the general practitioner of medicine. And yet it is a matter with which every physician should be tolerably familiar, for in the daily round of duty each is liable, at some time, to be called upon for an opinion, as regards both the present condition and the future prospects of an insane patient. Physicians in general practice occasionally meet with a case of mental aberration, apparently mild and tractable, but which, if un-

derstood in all its bearing, and if the causes, history, and course of the disease were carefully considered, they would pronounce unfavorable from the outset. The disclosure of such a fact would necessarily produce a shock upon the friends; but it would not destroy confidence in their physician. But if the doctor in his blind ignorance is over sanguine, and hastens to declare the case one of insanity which, if removed to an asylum, will speedily recover, and the patient is taken thither by the anxious but joyfully expectant friends, how much greater the shock and the disappointment, when their hopes have thus been unwisely raised, to be told by an expert in the matter that the case is one for which there is little or no hope of recovery. What a loss of confidence frequently results in such a case, and which no subsequent explanation can repair. Better by far to confess total ignorance of insanity; or, if that were unnecessary, it is wise in all cases to give a guarded and not an unqualified prognosis.

But there are, as a result of modern research and investigation, some "signs," so to speak, by which we may forecast the finale in many cases with tolerable certainty.

The elucidation of a few of these "signs" is the work we now undertake.

HEREDITY.

Among the most prominent influences bearing upon prognosis, is that of heredity. Almost the first question to be asked, when called to a case of insanity, should be: "Is there, as far as known, any hereditary taint?" In seeking a solution to this question, the physician should exercise the utmost prudence and tact; and he should push the question with ceaseless vigor. He may appear to be prying into the secrets of family history, and will often

be repelled by the over sensitive members of a "proud and ancient line;" yet he must ascertain the truth at all hazards, if he would give a correct and reliable prognosis, as well as a skillful diagnosis.

Bucknill and Tuke, in their admirable work on Psychological Medicine, express themselves on this point as follows: "Hereditary predisposition is unfavorable to permanent recovery, but not at all necessarily so to the restoration of mental health in the first instance, some statistics showing particularly favorable results. Still, if the constitution is saturated with insanity, signs of which have from time to time cropped up, it stands to reason that the prognosis must be much more unfavorable than in healthily constituted persons."

It appears to us, from a rather limited observation, that there are two distinct classes of insane persons afflicted by hereditary taint. In one class the insanity is of a volatile nature, and the victims alternate, at frequent and often at quite regular intervals, between the crest of a serene mental poise and the trough of profound mental aberration. Such cases easily recover, and just as easily they fall into a relapse. Eventually they die insane. If you meet with such a case, you may confidently express a hope of recovery; but the period of mental health is likely to be brief. Each attack, as it recurs, will probably be more protracted and more intractable than the one preceding.

There is another class, influenced by heredity, where the patient passes, at an early age, slowly but surely, into the thick darkness of a mental fog from which he will never emerge.

Given, a case where hereditary influences are strongly marked; where for instance, a parent, a grandparent, or several uncles or aunts have been afflicted with mental malady, and where brothers and sisters have also become insane, what is the prognosis? Always doubtful; in a majority of instances very unfavorable. True, recovery may obtain in cases of this sort, but it is not likely to be permanent. Sooner or later, this inherent weakness of intellectual faculty will again manifest itself, and the final result is a persistent and incurable chronic insanity.

Where heredity can be traced only to relatives of a minor degree, and where the immediate family history is clear, showing strong and well balanced mentality the prognosis may be

made more favorable, but even here the physician should be very guarded in the expression of hopefulness.

AGE.

The age of a patient who is insane is a valuable prognostic point, and is often quite conclusive in itself. Old age and extreme youth are almost equally unfavorable to recovery; the former from the fact that the forces of life are well spent, and all recuperative processes necessarily much impaired; and the latter from the equally important fact that the sources whence should spring their mental vigor have been blasted in their incipiency, and the whole mental structure of these unfortunate victims is weak, not from the wear of the world, but from an original lack of appropriate and well-tempered building material. Such are the children of sapwood and foliage; but they bear no fruit.

Patients who are over sixty years of age, especially if their physical health is impaired, rarely recover; although they frequently become quiet and tractable, and often live to a good old age.

Those who become insane before reaching the age of puberty are generally the victims of profound heredity, or epilepsy, or traumatic injury of the brain, all of which conditions are unfavorable to recovery.

From puberty to the age of twenty numerous cases of insanity are met with, the causes of which, in addition to those just mentioned, are masturbation, and irregularity in the performance of the menstrual function. Masturbators do not readily recover. Indeed, masturbatic insanity is one of the most intractable forms with which we have to deal. Insanity due to menstrual irregularity is often curable, providing the function can be established by the judicious use of appropriate remedies. Deep-seated and long continued diseases of the reproductive organs, often form an almost insurmountable obstacle in the way of restoration to mental equilibrium. The sudden check of a natural menstrual discharge, simple nervous erethism, or temporary functional derangement of these organs is, however, much more readily relieved, and the consequent mental excitement is controlled in a comparatively brief period by proper medication.

From the ages of twenty to sixty the chances for recovery are most favorable; bearing in mind

that the probabilities of recovery gradually decrease, especially in men after the age of forty-five. Women who have long been insane sometimes recover after passing the forty-fifth year.

SEX.

The idea currently prevails that more women than men become insane. It is a libel upon the opposite sex. Esquirol first promulgated the idea, and Prichard, Copland, Brown, Milligan, Haslam, and numerous other writers on insanity have blindly followed in his train. Dr. John Thurman, medical superintendent of the Wilts county asylum, England, has collected valuable statistics upon this point, the results of which are somewhat at variance with commonly accepted opinions. In a carefully prepared tabulated statement, he shows that of 67,876 patients admitted to British asylums, 36,044 were males and 31,832 females—an excess of males of 13 per cent. Excess of females in population 4 per cent. In another table, giving statistics from 32 institutions, French, English, and American, he shows that of 48,103 admitted, there were 25,601 males and 22,502 females, the excess of males being 13.7 per cent.

These are general results gathered from the various institutions of a single Dominion, and also from the asylums of different countries.

I herewith present a table showing the whole number of males and whole number of females reated in the various asylums throughout the United States during the past year, a table corroborative of those prepared by Dr. Thurman.

In some asylums the number of female patients largely predominates; such is the case in this institution, as well as is many others in the eastern, middle and southern states; while in the asylums of the west and southwest, the number of males is very much in excess of females.

There are two sound reasons for this apparently anomalous state of affairs: *First*, the number of females in the general population considerably exceeds the number of males, in our older and most thickly settled states. This fact readily account for the large number of female insane patients in our more venerable commonwealths. In the new states and territories, where the male population is in excess, it is natural to suppose that the asylums should be largely stocked with males—which is the fact.

Males 14,889. Females 13,252.

The *second* reason for the predominance of females (*i.e.* the *existing* number in some of our asylums,) is the fact that mortality among insane male patients is considerably greater than among those of the opposite sex similarly afflicted. Here again, one reason follows another in natural and harmonious order. No. of deaths in 48 asylums during the past year—males 1263, females 846.

The causes producing insanity among men are usually profound and far-reaching, and their influences are most disastrous. It is the stubborn oak, not the yielding willow, that breaks rather than bends before the blast. Men are, or should be, more inflexible and less yielding than women; and we believe it is true that they become insane less readily, if not less numerously, than women. They are also subject to at least one fatal form of mental disorder to which the weaker sex is almost a stranger, as for instance, General Paresis. Women become, insane more readily, or from a less profound exciting cause, than men. This is due to the nature of their being, their emotional character, and their occupations. As they are more delicately organized than man, so they are more keenly sensitive to all morbid influences. Called upon to act as the child-bearing element of humanity, their bodily functions are often roused to an intense energy, which must be followed by a corresponding relaxation and repose, for purposes of repair. The experiences of every woman who becomes a mother are those which not only exalt her to the pedestal of a demigod, but also expose her to physical ills which unfortunately tend to the dethronement of reason. And more than this, she suffers from the primal curse for thirty years, in the various and complicated disorders of menstruation. Through these trying fluxions of life woman must pass, and the ill health thus entailed often passes on to mental disturbance, through what is termed reflex action.

Woman also lives more completely in the world of emotions than man; hence she frequently becomes overpowered in her will and unbalanced in mind, through the might and whirl of her emotional passions.

Again the work of the woman, in her natural sphere of home, is less varied, and more steadily monotonous and humdrum, than the work of him who, in rugged conflict with the outside world, gets credit for being the *break*-winner of the family.

All these causes facilitate the inception of insanity among women; but even here the law of compensation is manifest, for if women more easily become the victims of this fell disorder, they also more readily recover mental poise—that is, under equally favorable conditions. In prognosis, therefore, it is important to consider the sex of the patient; and the chances of recovery are somewhat in favor of the gentler sex. But they are also quite liable to repeated attacks of mental disease.

PHYSICAL HEALTH.

The physical condition of an insane patient should have due weight in determining a prognosis. Hereditary affections, particularly of the lungs, should be looked upon as grave complications; still we do not readily subscribe to the theory that a tendency to phthisis also inclines the victim to insanity. On the contrary, phthisical cases are usually too bright and hopeful to become melancholic; and too easy in disposition and too weak in energy to make a success of mania. But the symptoms of phthisis and insanity sometimes alternate; the cough, expectoration, dyspnea etc., suddenly ceasing, and mania ensuing with more or less violence. In a family of consumptive tendencies there will sometimes occur a case of insanity while all the others remain clear in mind; we have been unable to discover that more than a due proportion of insane spring from families which are hereditarily inclined to phthisis.

The sudden check of a long continued drain from the system, as the healing of a chronic ulcer, the cessation of a chronic diarrhoea, or the stoppage of a catarrhal discharge from any mucous surface, is occasionally followed by an attack of insanity. Great loss of blood, such as uterine hemorrhages, severe and protracted fevers, malaria, heart disease, as mitral regurgitation; and chronic affections of the kidneys, are also causes or complications to which it seems appropriate to refer.

In all these cases, if the disease is profound and long continued, or if the most vital organs are affected, the prognosis is bad. If the insanity depends, in large degree, upon a physical disease which is curable, then there is hope of ultimate mental recovery. If the insanity can be traced to the diseases of childhood, which have apparently been cured, but which have left some unfortunate constitutional taint—then

the prognosis should be guarded in the extreme.

DURATION.

The time which has elapsed from the inception of insanity to the period when the physician is called upon for an opinion, is often of momentous importance. In some cases the prodrome is lengthy; and the approach of mental disorder very insidious. The patient's mind has been, as it were, stealthily enwrapped with gossamer threads, each in itself weak and easily broken; but in the mass and aggregate they form fetters which defy the strength of giants. Such are the bonds that bind the helpless victims of brooding melancholia to the rock of perpetual despair; such are the chains that overload the deluded devotees to that false, forbidden and fleeting pleasure, termed "self-abuse;" such are the cords that cling even through convulsive agonies to the unfortunate children of epilepsy. And of such material is the mantle, which, though it may be worn long and lightly, eventually forms the shroud of the General Paretic.

If an attack of insanity, of almost any form, has lasted continuously for over one year, the chances for restoration are almost immeasurably reduced; and in cases of two years standing the percentage of recoveries approaches zero.

The vast majority of curable cases are made well within the first twelve months from the inception, when placed under appropriate homœopathic treatment. A few regain their mental health during the second year. Very rarely a case of five, ten, or even fifteen years recovers; but this seems to be more the result of favoring fortune than of judicious medication. Such cases are to be regarded as the exceptions to a general and almost undeviating rule.

Hence we conclude that if a case, no matter how mild and apparently hopeful, has been insane for more than one year, the physician should give a doubtful—in fact, an unfavorable prognosis.

PROGNOSIS AS AFFECTED BY THE FORM OF INSANITY.

Cases of acute mania, puerperal mania, and acute melancholia, if uncomplicated by heredity, advanced age or extreme youth, and where the physical powers are good, usually recover. Indeed, if proper treatment is resorted to, at an

early date, there is, we believe, no reason why from 80 to 90 per cent of such cases should not be, permanently restored to sound mental health.

But there are forms of insanity which are practically incurable—*i. e.*, under the present powers of the healing art. And while we strive to walk in the way of progress, and petition for the early dawn of that medical millenium when all diseases to which flesh is heir shall be healed, we should never forget to deal honestly with our patients, and promise no cure where older and wiser men have failed. We may make new, unheard of, and grandly successful advances against Disease, the arch enemy of our race; but we should make no promises or prophecies which are likely to go unfulfilled.

The forms of insanity to which I refer as, thus far, non-amenable to treatment, are General Paresis, Masturbatic insanity, Chronic Dementia, and the insanity of Epilepsy.

In General Paresis, in particular, the prognosis should be almost invariably fatal. A few cases of recovery are reported; but we doubt the correctness of the diagnosis in such cases, or else regard the period of subsequent observation as too brief to be conclusive. Marked improvement may for a time ensue, and the patient often appears to be decidedly on the mend. Friends may think you have made a mistake, and physicians who know less of the disease than they should may for a little while confirm the false opinion; but hopes and opinions of this sort are soon dashed by a return, with increased violence, of the original symptoms.

Cases of masturbation, in the border land of dementia, are sometimes sent to an asylum by the family physician, with the assurance that a course of treatment there, and the application of necessary restraint, will restore this blasted branch of the family tree to an invigorated, sound and healthy condition. It is the unwise excitement of a delusive and never-to-be-realized hope. True, an asylum is the best place for such a victim of unholy passion; and some are greatly benefited by treatment and restraint. But too many, alas! are past the aid of remedy or restriction, and beyond the reach of human means for relief. All this is sadly deplorable, but nevertheless true.

Whether masturbation is the cause of insanity, or insanity the cause of masturbation, it is not within the province of this paper to discuss. We simply present the fact deduced from a somewhat extensive research among asylum reports, from the testimony of accomplished experts, and from the records of medical literature, that the unhappy victim of this terrible social curse is not a favorable case for treatment, and is one for whom the prognosis should always be doubtful.

Dementia, whether the result of some other form of insanity, long continued, or whether it springs from some hidden or unseen cause, is rarely cured. They are frequently improved, and sometimes get sufficiently quiet and tractable to be safely returned to their homes; but they seldom or never regain their original mental vigor.

Insanity from epilepsy is usually intractable. Heredity is a marked characteristic of this form. Mental obliquity is usually observed very early in life. All these conditions are favorable to the gradual, steady and sure increase of the disease. Who can reveal a "ready method" for the relief of *such* cases?

PROGNOSIS AS AFFECTED BY CAUSES OF INSANITY.

Among the physical causes of insanity which affect prognosis unfavorably, are syphilis, and traumatic injuries of the brain. The effects of intemperance, loss of friends or property, over work, and physical or mental shocks from various causes, may, in a large degree, be overcome by judicious treatment; but if it can be ascertained that the patient has had an attack of syphilis, or has received a blow upon the head, no matter how far in the past either "accident" may have occurred, then the prognosis must be very doubtful.

A blow upon the head may be followed by no immediate or apparent results save those of slight concussion, or an external bruise; but after months, or perhaps years, of intervening freedom from unfavorable symptoms, there may ensue a series of brain troubles which are not only grave and serious, but almost invariably fatal. If insanity can be traced to traumatic injury, then, very few or no hopes for recovery should be held out; for little short of a miracle can work a restoration. Chronic inflammation of the meninges, abscess, tumor, and other profound pathological changes, are frequently the

direct result of injuries inflicted long previous to the open manifestations of brain disease.

The effects of syphilis upon brain tissue is quite as insidious and almost as fatal as traumatism. But the patient will probably live longer; and although the forces of life sometimes yield slowly, they yet yield surely, to this sweeping scourge.

Now to conclude, it is hardly necessary to state that in order to make sure prognoses in cases of mental infirmity, it is imperatively necessary to understand thoroughly and correctly in all its aspects, that protean-shaped disease known as insanity. In other words an accurate diagnosis, and a careful consideration of the effects springing from heredity, age, sex, the form which the disease has taken on, and whatever physical or moral influences may have a possible bearing upon the case in hand, must be made in order to insure a prognosis which time cannot shake. Above all, we should ever guard our prognoses, no matter how sure we may feel, by an expression of unexpected possibilities.

It may appear to some that we have not taken a hopeful outlook over portions of the world of insanity. To such we would say that while we have the utmost confidence in the benign and healing action of drugs, when applied with critical exactness, according to the Homœopathic law of cure, we must consider, also, that there are certain conditions under which the human system may be placed, where all other laws yield to the inevitable decree of mortality. And while we should earnestly apply these drugs, with faith in their far-reaching efficacy, we should not forget that there is an impassable limit to the powers of the healing art; and we should consequently school ourselves to recognize with accuracy and promptness the boundary line beyond which we can never hope to achieve success. We should not only seek to heal the sick committed to our care, but to discover, at a proper time, both the limits of endurance in our patients, and the scope of our own powers as physicians. When this is done we shall no longer lead our followers, as blind leaders of the blind, to sure but unseen destruction, without one word of friendly counsel or warning.

In the work to which we have, in an imperfect manner, invited attention, there is required subtlety of discrimination, fertility of judgment, breadth and variety of knowledge; and such

powers of prophesy as come from the possession of royal wisdom. The demand upon the modern physician is made by an intelligent and exacting public.

A CONTRIBUTION TO THE PATHOLOGY AND TREATMENT OF PULMONARY CONSUMPTION.*

BY DAVID WARK, M.D., OF NEW YORK.

Dr. Hutchinson has shown that a healthy man who, after having taken a full breath, is able to expire 174 cubic inches of air, will, if he becomes consumptive, be able during the first stage, to expire only 117 cubic inches, during the second stage 99 inches, and during the third stage only 82 cubic inches. If his capacity during health had been 230 cubic inches, it would be during the first stage 154 inches, in the second 131, and in the third but 108. These statistics show that in the earliest detectable stage of consumption, the breathing capacity declines nearly one-third, while in the later stages the deficiency is still more marked.

An examination of the chests of consumptive patients will show that they lack the mechanical conditions requisite to carry on the respiratory process properly, their chests are usually narrow and flat, the walls of this organ are stiff and unyielding, playing out and in at each breath, with difficulty, the elasticity of the lung tissue is impaired, and the function of some parts destroyed by inflammatory action, and the deposit of adventitious matter.

In this disease the capillary circulation is notably defective. The chilliness of which these sufferers complain so much, is caused largely by inadequate production of heat in the system, and irregular circulation of thin blood in the skin, and at the extremities, the vital fluid having a strong tendency to forsake these parts to form internal congestions.

Again, all the vital changes that food undergoes in becoming living blood, require the presence of an abundant supply of oxygen. A definite quantity of this gas is needed to complete the vitalization of a given quantity of food. A man requires about two pounds of solid food per day, and very nearly the same weight of oxygen. Therefore we shall not be very far from the truth when we say that an atom of food requires to be acted on in the body by an

* Read before the Hom. Med. Society of the Co. of N. Y.

atom of oxygen in order that its vitalization may be accomplished. If the supply of oxygen by respiration is deficient, some portions of the food must either partially or not at all undergo the needed vital changes. But the course of this imperfectly elaborated food cannot be stayed—it must pass from the blood into the tissues, to supply as best it may the physical waste. Therefore the materials that are furnished from the blood of persons of consumptive diathesis, who breathe too little, are badly fitted for their duties. The tissues of such persons being worn out are renewed by matter possessing a low degree of vitality, it having failed to reach the high organization of truly living matter. Some particles are so inadequately endowed with life that nature cannot use them to build up the living body. Such matter is, therefore, necessarily deposited in various parts of the body, and when it occurs in the lungs it gives rise to pulmonary consumption. These considerations, taken in connection with the immunity from consumption enjoyed by those whose respiratory organs are well developed and properly used, as well as the notably good effects that are promptly secured to consumptives by any increase of the breathing capacity, incline me to believe that the notable failure of nutrition of the peculiar type which results in the formation of tubercles is the result very largely of inadequate respiratory capacity, either congenital or acquired.

The correction of the depraved nutrition incident to this disease has for a long time obtained professional attention. Many theories have been advanced with a view to explain the basic pathology of consumption, and many remedies predicated on such theories offered for its cure. Many staple articles of diet have also been concentrated to a fraction of their natural bulk with a view to increase their nutritive power for this class of invalids. But after this valuable advance in the right direction has been made, there remains to be corrected a very serious defect in the present treatment of consumption. It is not enough to supply a consumptive with all the materials he needs—nourishing food and nutritive remedies—then leave him to build himself up with these as best he may. His power to do this can and ought to be increased. His capacity to make richer blood, stronger muscle, and sounder lung tissue should

be enlarged by stimulating his assimilative functions to the highest degree of activity. When these indications for treatment are recognized by the profession generally and reduced to practice, the prognosis of this dreaded disease will be more hopeful. If then, pulmonary consumption is attended by, and carried to a fatal termination largely because of, inadequate respiratory capacity, it follows that the best treatment must consist, at least in part, of measures adapted to increase that power. There is doubtless a peculiar diathesis that has something to do in causing consumption; but I think that this constitutional tendency would be fatally developed less frequently than it is, if the breathing powers were carefully and scientifically cultivated. Consumptives need pure fresh air, and power to breathe enough of it.

To secure the latter, the size of the chest must be enlarged, and the motions of its walls restored, so that they will readily and fully expand with every respiratory effort. A larger quantity of air will thus be utilized. The respiratory muscles should be invigorated, and the capillary blood circulation made as nearly perfect as possible. In proportion as these indications are accomplished, the breathing of a consumptive becomes calmer and deeper even when indulging in exercise. The blood is more abundantly supplied with oxygen, the life forces feel the quickening influences of this vital gas, their natural stimulus, and the symptoms of disease will, at least measurably, give place to the evidences of returning health. All medical men, as far as I know, seek to increase the appetite of a consumptive to a healthy standard, if it is defective, and strive to enable him to make his food into good blood and sound tissue—and to do these is to cure him. But the amount of food a man can appropriate bears a very close relation to his respiratory capacity, the condition of his capillary circulation and the rapidity of tissue-metamorphosis. Disturb these, or supply him with impure air and his appetite immediately falls off, and his nutrition becomes disordered. Increase his breathing power, supply him with pure air, and perfect his blood circulation, and his nutrition improves that very hour, an increased demand for food is set up in his system, and his stomach at once becomes clamorous for an augmented allowance.

Therefore, I think it is impossible to create in

the system of a consumptive a normal demand for nutrition as long as his capacity to breathe steadily declines, and we know that it does constantly diminish until it finally ceases altogether; but if we can increase this, normal tissue-metamorphosis will in the same ratio become active, and the appetite will take care of itself.

In attempting the cure of a case of consumption, the first endeavor should be to obtain control of the capillary blood circulation. This can be effected quickly and certainly by massage, a remedy which is now justly regarded with much favor by many medical men. When this is used with tact and judgment the following effects may be looked for in a few days. All the blood in the capillaries is pressed into the minutest ramifications of these vessels in greatly increased quantities, and gently urged onwards through the veins to the lungs for purification. As soon as the pressure employed in this treatment is removed, the capillaries are quickly refilled with fresh blood from the arteries, which are thus made to bring a larger supply to the needy parts of arterial blood charged with nutritive matters, the passage of which, from the vessels to the tissues is also, I believe, greatly facilitated by the mechanical pressures and pullings of this treatment, as it is by the vigorous contraction of healthy muscle. The veins are at the same time stimulated to absorb and dispose of waste matters by the natural channels. Retrograde metamorphosis is hastened, because the union with oxygen of living atoms normally undergoing destructive change is promoted, and the affinity of the blood itself for oxygen is increased; tissue waste is thus effectually reduced to those gaseous and fluid forms that fit it to be totally eliminated from the body. All these vital operations are normally stimulated without the expenditure of the weak patient's nervous energies. These are usefully employed in repairing the wasting tissues with new and better material. The nutrition is thus improved, and a condition of both solids and fluids is established directly opposed to the formation of tubercular matter in the blood and its deposit in the lungs.

After the circulation has been regulated and the pulmonary congestion relieved, movements, active and passive, to expand the chest and increase the capacity for air, are in order.

A healthy adult breathes about one thousand

times per hour. Now it is not unusual to succeed, by the means indicated, in enabling a consumptive to inhale at each unforced breath two or three cubic inches of air. But if we assume the increase to be only $1\frac{1}{2}$ cubic inches at each breath, he would then inhale nearly 30 cubic inches more per minute, or about one cubic foot per hour, an amount that can in properly selected cases promptly stay the progress of the disease, and eventually lead to its removal. Under this treatment the rate of improvement in different individuals varies considerably, being of course determined by the nature and stage of the disease, and the remaining constitutional stamina; it is, however, usually very rapid. Patients in whom chronic consumption has made moderate inroads, and who are skillfully treated by the means indicated, may be confidently expected to improve decidedly in two or three weeks, and I have repeatedly observed the physical signs denoting the presence of softening tubercles at the apex of a lung gradually disappear, and give place in six or eight weeks to a respiratory murmur nearly normal.

Valuable help can also be afforded to those who are fatally diseased, to an extent surprising to physicians who observe the effects of this treatment for the first time; even such sufferers can be greatly benefited; their circulation is regulated, appetite improves, sleep becomes sounder and more refreshing, muscular weariness is dissipated, strength increases, cough and expectoration are checked. Of course the time comes when no farther improvement can be obtained. I have, however, seen consumptives who were not expected to live many weeks, obtain decided improvement and survive three or four times as many months.

In 1864, I used this treatment in the case of a lady who had been declining for a long time, and had become so reduced that she expected to die in about six weeks. A short course under my care did her so much good that she lived and enjoyed life about two years.

Cliniq.

TREATMENT OF POTT'S DISEASE IN THE CERVICAL REGION.

BY W. C. GOODNO, M.D., PHILADELPHIA.

Serious difficulties have hitherto attended the

mechanical treatment of Pott's disease in the upper portion of the spine.

Its proneness to rapidly increasing deformity, with the grave symptoms often attending it, has led surgeons to a great variety of measures, with somewhat of success, the indications being—to support the spine in its normal position, and, if necessary, remove the weight of the head by extension, while, by proper attention to hygiene and internal medication, the destructive process is checked, and nature cures by fusion of the softened and broken down vertebrae.



In America, Sayre's "jury mast," in connection with his plaster jacket, is most frequently used, and is perhaps the most efficient apparatus at our command. While it is a great advance and much to be praised, there are certain objections to it; and first, it does not secure that degree of immobility which, in connection with proper position, is the great desideratum in treatment—and which is more important in the

cervical than in the lower spinal region. Again, the instrument cannot be worn at night with comfort, and if it is removed the efficiency of the treatment is lessened.

To secure a method free from these defects, I suggested the use of the plaster bandage carried over the neck and head, well shown, in the accompanying illustration by Faber, which is an accurate representation of a case now under treatment at the Penn. Homœop. Hospital for children. Although the disease was of eighteen months duration, and the chin touched the chest below the right clavicle, and accompanying this there was paralysis of the left side, all deformity was immediately reduced, and the child is steadily improving.

The method of suspending the patient for

the application of the bandage differs according to the position of the curvature. If entirely cervical, extension from the chin and occiput is sufficient, simply using force enough to bring the spinal bones into their proper position. But if the curvature extends into the dorsal region, extension from the axillæ will be necessary, simply as an accessory, however—as in all cases extension from the chin and occiput should be made first, and when a sufficient amount can be gained in this manner it should be relied upon alone. The ordinary method recommended by Sayre can be used for the axillæ; but for the head a roller bandage is necessary, as it can be cut or withdrawn on the completion of the application. It is essential that the shoulders, neck and head should be carefully padded with cotton, to prevent pressure upon the great vessels of the neck, and excoriation of the skin over bony protuberances. The hair must be cut short, and a dry roller applied, or, what is better, a night-cap which extends to the eyebrows; stitched upon the inner side of the cap should be a layer of cotton, particularly thick about the ears and beneath the jaw; the latter is particularly important, as it allows considerable motion of the jaw for eating, talking, etc. It is a process attended with some difficulty, to carry a bandage neatly over the neck and head; but fortunately the web plaster bandage can be molded into any shape, and a little practice enables one to put on a dressing which is both neat looking and effective.

The free use of tin lightens and strengthens the apparatus, and it can be cut or bent into almost any desirable shape. Layers of muslin, with plaster rubbed into its meshes, can be cut to fit the parts, and if necessary covered in by the roller. The dotted lines observed in the accompanying illustration indicate portions of the bandage which may be removed the object being to give more freedom of motion to the jaws, and uncover the ears. In aggravated cases, however, it is better to allow the bandage to remain intact, feeding the patient fluid or semi-solid food. If decided extension seems necessary, as it is in some cases, pad the top of the head thickly with cotton before applying the roller. Enclose in the layers a firm piece of metal extending from the waist to the forehead, well flattened and roughened, and after cutting away a sufficient amount from the sides of the head, as indicated by the dotted lines, apply a supporter similar to Sayre's, only buckling on the side, instead of behind. In this dressing the patient can sleep with comfort, play out of doors and run about with ease. It gives a sense of comfort and ease appreciated by small children, who are anxious for a second application after the first has been removed, which is one of the best indications of its efficiency.

THE ASPIRATOR IN A CASE OF HYPERTROPHIED PROSTATE.

BY M. W. GALLUP, M.D.

April 5th 1876 I was called in the morning to see S. G., aged 85. I found him suffering from complete retention of urine, with frequent painful urging. He had been attacked the evening previous with burning pain in the perinæum, pain in the glans penis, and constant desire to urinate, only a few drops being voided at a time. Since two A. M., he had not been able to pass a drop. The history of the case showed that for twenty years he had had more or less difficulty in urinating, the stream being slow to start, and lacking sufficient force to give it the normal graceful curve to the ground. There had been times when for days he could not thoroughly evacuate the bladder, but he had never had complete retention before. He had never had any treatment for it.

An examination per rectum revealed a prostate very much enlarged. The bladder was not much disturbed. I prescribed Canth 3rd, ordered hot fomentations, and left him till evening. On my return, I found the bladder much distended, and the pain intense. I essayed to use the catheter, and found in the membranous portion of the urethra a spasmodic stricture which taxed my patience considerably but was finally overcome, and the prostatic portion reached. Beyond this the instrument would not go without the use of unwarranted force. The parts were very sensitive. I tried all the catheters I had, both hard and soft, and finally called in an allopathic competitor. He also failed.

During the night I went to Watertown, distant fourteen miles, and obtained an aspirator. On the morning of the 6th, I etherized the patient, introduced the needle in the median line about two inches above the pubic bones, and drew over a quart of urine. I continued to use the aspirator for five days, at intervals of about eighteen hours at first—afterward less.

At the end of five days, I learned that an old Botanic doctor living next door to my patient had repeatedly asserted that he had treated lots of such cases, had never failed to draw the urine with a catheter, and that the use of the aspirator in my case was wholly unnecessary and barbarous. I permitted him to be called. After treating me in a manner that did violence to social etiquette and medical ethics, he *did* introduce a

silver catheter the whole length of the instrument, but it did not enter the bladder, and consequently all he drew from the patient was blood and groans. He said he guessed I would have to use the other "thing."

The first urine drawn after the false passage was made contained some mucus and considerable blood. During three weeks I used the aspirator in this case over fifty times. The patient was etherized for the first three operations. Then I persuaded him to try it once without and he bore it so well that I never gave him the anæsthetic again. The punctures were all made within a space that could be covered with a nickel. They healed readily, and no trace of them could be seen in about three days from the time they were made. During these three weeks the indicated homœopathic remedies were used, (chiefly Canth and Puls) and the urethra and prostate not being irritated by the use of the catheter, the gland decreased in size till my patient could himself empty his bladder in the natural way. After the use of the instrument was suspended he lived six weeks, in perfect freedom from pain, and passing his urine with but little difficulty; but the suffering he had undergone had so exhausted the little vitality left by the weight of his fourscore and five years, that he died.

Why is not the use of the aspirator in cases of enlarged prostate preferable to the daily irritation of the urethra and gland by the catheter? Even when the use of the catheter is possible in these cases, it is often attended by a great deal of pain, and thus protracts the case. Every time that I proposed to my patient a trial of the catheter, he begged for the aspirator. The use of the latter instrument, by leaving the diseased parts entirely free from mechanical irritation, gave homœopathic remedies a chance to effect a cure.

THE SURGICAL TREATMENT OF INTERNAL HEMORRHOIDS.

BY DAVID WARK, M.D., NEW YORK.

PART III.

THE ADVANTAGES OF THIS METHOD.

The operations commonly employed by surgeons for the cure of hemorrhoidal tumors are their strangulation by ligatures, destruction by nitric or chromic acids, and their removal by the galvano-caustic wire or needle. Comparatively few persons, whose piles cause such se-

were suffering as to render life itself a burden, or whose hemorrhages have become so copious as to threaten to prove fatal, can be induced to submit to any of these methods of treatment on account of the suffering and danger by which they are attended. There are multitudes of persons who labor under this distressing surgical disease who would gladly avail themselves of a mode of cure so safe and satisfactory as that I have attempted to describe if aware of its existence. I am of the opinion that medical men in general practice are not fully aware how large a proportion of apparently well persons suffer severely from hemorrhoids. I have known three cases in one family, although the regular medical attendant was not aware of the fact. They had a very high opinion of his general professional skill, and always trusted him implicitly, but they did not think either he or any one else could radically cure their piles by any method to which they were prepared to submit. Therefore, when their disorder was especially troublesome they resorted to domestic palliatives, and got along as best they could.

I commend this treatment to the profession, because it is comparatively painless; an attack of idiopathic inflammation occurring in a mass of tumors causes a patient quite as much suffering as their radical cure, while in the former case the disease is made worse, as I have attempted to show. Because it is safe. Occasionally serious results follow surgical operations of a very simple character, and I have mentioned some accidents that might occur during the treatment of piles by the means here laid down. I may say, however, that none have occurred in my own practice that did not terminate happily; and I do not think that any are likely to occur in the hands of any experienced and careful surgeon. A somewhat extended experience in the practice under consideration, has confirmed me in the opinion that it is one of the most valuable recent advances in surgery, and therefore thoroughly worthy the confidence of the profession.

MEANS TO BE EMPLOYED TO PREVENT THE RETURN OF HEMORRHOIDS AFTER THEIR EXTIRPATION.

The anatomical structure of the rectum, its physiological action, and the manner in which the venous blood is returned into the general circulation, all favor the production of hemorrhoids. In the first place we have the rectal

walls, composed of three tubes, as it were, counting from without inwards; first, a powerful muscular tube, another of elastic cellular tissue, and lastly, one of mucous membrane. During the act of defecation, particularly if the fecal matters to be evacuated are the result of a constipated habit, the rectum contracts vigorously on its contents, the blood circulating in the tortuous venous network of the submucous cellular tissue is thus stopped, or at least greatly retarded, and the walls of the veins are distended therewith in a manner that severely taxes their strength, even in health. When a prolonged application of this force is brought to bear on the parts daily, or at least several times a week, it is not surprising that the blood-vessels sometimes become varicose and project on their mucous aspect, the side on which they have least support.

A very large part of the blood from the hemorrhoidal plexus passes into the portal vein, through the superior hemorrhoidal and inferior mesenteric veins. These vessels being destitute of valves, the whole column of blood between the rectum and the liver exercises a pressure more or less direct on the blood-vessels of the hemorrhoidal plexus; and when we add to this the resistance frequently offered to the return current by intestinal and hepatic obstruction, we need not be surprised that so many persons suffer from piles, and I feel confident that the disease would be much more frequent than it is, were it not for the provision that exists by which congestion of the hemorrhoidal plexus may be relieved by emptying a portion of its contents into the internal iliac through the inferior hemorrhoidal vein.

These facts suggest the line of treatment to be adopted by the surgeon to prevent his patients relapsing after a cure has been effected.

Constipation, if it has existed, must be removed, the bowels being put and kept in a soluble condition. At the same time, cathartics, of every name and nature, from Glauber's salts and mandrake to Apollinaris and Hunyadi Janos, must be positively vetoed. Drugs of this class frequently used, especially aloes and rhubarb, have a powerful influence in causing hemorrhoids. Many persons are constipated because their food contains too little waste matter, it is too concentrated, it has not sufficient bulk to properly stimulate the natural vermicular mo-

tions of the intestinal tube; for such persons, a heaping teaspoonful of yellow Indian meal stirred into a wineglass of cold water, and taken after each repast, will often be found an excellent corrective. Deep kneading of the abdomen is also a peristaltic persuader of undoubted efficacy. These and other measures suggested by the necessities of each case should be diligently used until the object is attained. If the liver is in the diseased condition described by the popular and graphic term "torpid," it should be aroused to healthy action if possible, and the circulation through it improved, both for the sake of the liver itself, and because of the directly unfavorable influence it exercises on the rectal blood-vessels. I believe that congestion is an almost constant attendant on diseases of this great gland, even when their pathology is in other respects very different. The two following exercises have a very decided effect in stimulating the portal circulation. Let the patient support his body horizontally on the tips of his toes and the palms of his hands. No other part of his person should touch the floor. Now let him lower the hips slowly, until the pubic bone touches the carpet, then slowly elevate them again to the horizontal position, repeating the movement five to ten times. Suspending the body partly or wholly by the hands from a trapeze bar, placed as high overhead as can be reached while standing on the ground, is another useful exercise.

I have found these two movements singularly efficacious in stimulating the abdominal and hepatic circulation, and I mention them the more readily because they are not incompatible with any other purely medicinal treatment the doctor may see fit to prescribe. Spirituous and malt liquors should be interdicted. I have seen a number of patients having piles who stated that a single glass of ale was notably injurious. These and other precautions are wise. But I have removed hemorrhoidal tumors from a large number of persons, very many of whom, feeling perfectly well, pursued without change the same course of life after as before their cure—yet I have very rarely seen the disease offer to return, and when it did, it was easily and finally checked.

A FEW CASES OF CEREBRAL LESION.*

RECORDED BY A. W. HOLDEN, M.D.

During the late war of the rebellion, while

attached in a professional capacity to the Medical Staff of the Union army, it was my fortune to have brought under my observation and care several cases of severe injury to the skull and brain, from which fatal results might have been prognosticated with almost absolute certainty; but which, contrary to expectation, were restored to health, and the patients resumed their duties and pursuits in life. As these cases have not hitherto been published, and may possibly prove to be of interest if not instructive to the profession, they are herewith submitted for your consideration.

CASE I.—The records of this case are not as complete as I could wish, the patient having passed out of my hands in consequence of a transfer of wards, before convalescence was established.

In the year 1864, a Union soldier, belonging to an Ohio regiment with a large number of wounded, was brought to the U. S. General Hospital at Clarysville, near Cumberland City, Md.,—to which I was at that time assigned. His injury was a gun-shot wound of the head. The patient was about twenty-five years of age, of fine physique, robust appearance, and so far as could be judged, of previous regular habits, and unimpaired constitution.

There was a perforation in the center of the forehead, evidently made by a bullet of medium calibre. This opening penetrated the skull, the edges of which, upon exploration by the finger, appeared smooth, and not serrated or jagged, indicating that the momentum of the impinging missile had been considerable. The wound was not disturbed by a probe, for the reason that little good and much harm might result from its use. Examination by the finger indicated a laceration of the investing membranes, and the direction of the wound showed that the ball had probably passed along the course of the longitudinal fissure. Its subsequent course and final place of lodgment were of necessity entirely conjectural. The previous history of the case was unknown, the patient having been found in an unconscious state upon the battlefield, and brought by easy stages to the hospital. The treatment was expectant, with topical dressings of cold water, and antiphlogistic regimen. He was discharged from the hospital in about four weeks—improved and convalescent. His subsequent history is unknown.

*Read before the Hom. Med. Society of the Co. of N. Y.

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"A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the ONLY ACKNOWLEDGED RIGHT of an individual to the exercise and honors of his profession."—Code of Medical Ethics, Amer. Med. Ass., Art. IV., Sec. 1.

THE STATE SOCIETY.

The semi-annual meeting of the State Society held on the 17th and 18th of September, in the Insane Asylum at Middletown, was one of the most interesting and enjoyable in its whole history. Independent of the general work of the Society, members in all parts of the state gladly availed themselves of the opportunity of seeing, under such favorable auspices, with their own eyes, the workings of the only Homœopathic Insane Asylum in the world. They were more than gratified. The wide-spread and varied landscape opening before them on all sides, showing at every turn some new charm, and such magnificent possibilities, in the wide lawns and ample grounds, for culture, beauty and comfort, and the superb buildings, so artistic in their construction, the centre of this scene of beauty, conveyed some faint idea of what this institution, now in its infancy, may be in the future. The members were met on the threshold by the trustees and medical officers of the asylum with warm greetings, and cordially welcomed as guests of the institution. As they walked through the wide corridors, through the executive offices, the library, the kitchen, and up into the rooms of the patients, catching through each window glimpses of beauty, the institution seemed like a home full of sunshine, where the mind, for a little while "like sweet bells jangled, out of tune," could

recover its harmony. They saw everywhere in the medical workings of the institution, one prevailing idea, that the disordered mind must be won back to harmony, not alone by drugs, but by pleasant surroundings, and home-like comforts. It is from this idea, carried out feebly, it is true, but with all the means in our power—that the most beautiful and delicate instrument ever strung to harmony by the Divine Mind must be dealt with by gentle hands, by influences whose subtle power removes discordant elements, and restores harmony, without bodily harm—that this institution, in its infancy, can point to a percentage of deaths less, and a percentage of cures greater, than any other asylum in the United States.

No wonder, in the face of these facts, walls built up by long ages of power, and cemented by bigotry and intolerance, are crumbling to dust. The sun of medical freedom is melting away the dross of ignorance, bigotry and self-conceit, and fusing into one bright, pure crystal the true and the good. This institution, whose doors were thrown wide open to receive the representatives of a great profession, is a prouder monument of medical progress and medical liberty than was ever before reared by human hands. It is the same strong, broad spirit, which in all ages, has pushed forward all great reforms, has made states, and revolutionized the world. It is a freedom founded on enlightened thought, which while it searches with ever increased zeal for new truths, clings also to all the truths of the past, seeking to give new and more rational forms to old truths and transfigure them into the more glorious forms of the new. Science comes not to destroy, but, aided by a rational philosophy, to fulfil all the noblest aspirations, the most glorious hopes of the race; a philosophy in which the new includes the old, and the old incorporates and assimilates the new, each modifying and modified by the other. In this spirit of rational freedom, of scientific progress, we hold out the hand of fellowship to all who strive for the good of humanity, and cordially welcome to the ranks

of a scientific profession the earnest seekers after the truth,—trained in the walks of science—respecting in all that liberty of thought and honesty of conviction which we claim for ourselves.

The Homœopathic Insane Asylum is one of the first fruits in our profession of the advancing spirit of the age. If, in our youth, in the half-century during which, for liberty of investigation, we have been obliged to band ourselves together in a distinct organization, we have run the plowshare under the roots of old errors and superstitions, what may not be accomplished in the vigorous strength of manhood, when the whole profession, bound together in the strong ties of scientific fellowship, shall work with united strength for the good of humanity?

THE YELLOW FEVER.

This fearful pestilence, which is now carrying desolation to so many homes in the South, presents but few features different from the usual developments of the more severe form of the disease, except that in this epidemic, the chill is frequently wanting, and the pain in the lumbar region is not marked till the fever sets in. The fever reaches its height in the early part of the second day, the temperature averaging about 105. The urine decreases in amount, and, as the disease advances, is frequently albuminous. The tongue is moist and creamy, and the tip and edges red. The pain in the head, back and limbs becomes intense. The bowels are sometimes open, and sometimes constipated; nausea sets in, with vomiting of bile, and tenderness over the epigastrium. This, the first stage, may last from twelve to seventy-two hours, and is frequently attended with hæmorrhage from the nose, and jaundiced skin. With the fall of the fever, which usually occurs on the second day, commences the stage of remission. The temperature falls to almost its normal condition, the patient feeling weak, but free from pain. This is the period when the patient should be closely watched, restrained from exposure and fatigue, and food given with the utmost care. Without these precautions and even with them, not unfrequently, in from two to twenty-four hours, the disease rouses itself in all its fury. The temperature increases. The skin is apt to assume a yellow hue. The stomach becomes irritable; ejecting first acid and glairy matter sometimes mixed with bile, which soon changes to a reddish brown or blackish

color, with sediment like coffee grounds—the terrible *black vomit* peculiar to this disease. At this stage, we are apt to have black evacuations, hæmorrhage from internal organs, suppressed urine, and sinking pulse. In fatal cases, the third stage, that of collapse speedily follows, with its great prostration, flickering pulse, coma or convulsions, and death. The symptoms and duration of the disease of course vary with the peculiar types which it assumes; but the duration is generally from three to nine days.

This disease, in its various stages, presents so marked a picture of the action of certain remedies, that we should naturally expect that their administration would be followed by positive beneficial results. The administration in the early stage of a warm infusion of orange leaves to promote perspiration, the use of *aconite*, *belladonna*, *bryonia*, and *arsenicum*, and perhaps two or three other remedies, as indicated in the several stages, with proper hygienic attention, constitutes the most successful line of treatment yet adopted. Even among the more conservative of the allopathic school, the treatment is usually expectant, calomel and quinine having proved so unsuccessful that they are given with caution. In the last epidemic of this fever in New York, Dr. Hosack, one of the most clear-headed and eminent men in the profession, claimed that it was a disease whose first attack was upon the nerve-centres, and that the use of calomel in large doses, then so much in fashion, would almost surely prove fatal. He recommended the free use of *eupatorium*.

The cause of this disease is still involved in obscurity. A recent writer in the *Southern Medical Record* believes the poison to be introduced into the system by the spores of microscopic plants entirely different from malarial or typhoid fever poison-germs. The yellow fever plant is never formed above an elevation of five hundred feet above tide-water, and is so delicate that it is destroyed by the first frost. This theory, he thinks, accounts for the fact that the fever progresses by the ocean and along the water courses, below an elevation of five hundred feet. The conditions for the full development of the yellow fever plant, he says, are—a mild winter preceding the epidemic; excessive rain falls saturating the soil; large areas of stagnant water; continuous warm weather, and a limited altitude above the sea-level.

Whatever theory we may adopt as regards the peculiar nature of the poison, or how generated, the progress of this epidemic shows conclusively that the poison-germs are transmitted through the atmosphere, oftentimes leaving those places of filth where we should suppose they would prove most fatal, untouched, and finding the necessary fructifying soil in clear, airy localities, creating fever nests where we should only expect to find health. In this respect, its progress resembles that of certain epidemics in this city, as shown by the map in the Health Office, where the first ravages are seen along the line of known impure localities, but soon as if carried along by the atmosphere, finding its home in localities where every precaution of health is taken. It is to be hoped that careful observation of scientists will discover, during the progress of this pestilence, facts which will prevent its future development on our soil.

THE CRITICAL PERIOD OF HOMŒOPATHY.

BY H. M. PAINE, M. D., ALBANY.

Dr. E. M. Hale, published an article in the November (1877) number of the American Homœopathist; entitled, "A Critical Period for Homœopathy," in which he clearly sets forth the danger to our school from the adoption of homœopathy by Old School physicians, *without an open acknowledgment to that effect*. This article is strongly supported by indisputable evidence, and clearly points out the influences which are accomplishing the destruction of the homœopathic school, *as a separate and influential body of medical men*.

Accessions to our ranks are derived from only two sources: those who are educated under homœopathic auspices, and converts from the so-called regular school. Of the first-class named, those who have graduated from our own medical schools, there were the present year, only three-hundred and nineteen, * a number so small as to be scarcely sufficient to fill the places made vacant by death and other causes. It is plainly apparent therefore, that recruits from this source must be largely increased, or else we must depend chiefly on the second class mentioned, viz., converts from the so-called regular school.

On even a cursory examination in this direc-

tion, the result, is exceedingly unpromising. Those of us who were participants in the contest between the two principal rival schools can vividly recall the scenes which occurred twenty and even fifteen years ago. Then there were constant accessions to our ranks from those of our opponents. Desertions were so numerous as to impair the strength of allopathic legal organizations, and, in some localities, seriously threaten their existence. At the present day the exodus has nearly ceased. The comparatively few converts who are willing, openly, to admit their belief in homœopathy, may be numbered by tens, while formerly there were hundreds.

In looking for the causes which have brought about this result we find that they are mainly due to the adoption of a wise and liberal policy on the part of the allopathic school toward its own members. During the past ten years instances of the resort to discipline for practising homœopathically, have been of very rare occurrence. The so-called regular school has virtually abolished all rules having reference to the infliction of a penalty regarding matters of medical belief. Its members are now freely allowed the privilege of believing and practising all systems of treatment extant. It has practically adopted the wise suggestions recommended by Dr. Dunham, in his admirable address, delivered before the American Institute of Homœopathy, in June 1870, regarding "Liberty of opinion and action."

This prudent and liberal policy has enabled our opponents to retain very large numbers of physicians who would otherwise have united with homœopathic medical societies.

By this radical change of base our rivals have largely promoted the popularity and numerical strength of their own school. Strange as it may appear, is it not on account of the adoption of this liberal policy, that the accessions to the number of homœopathic physicians, are mainly within the membership of the so-called regular school? While the number of physicians who are willing to publicly announce their belief in homœopathy may be diminishing, the number who are *actually* practising homœopathically is *steadily increasing*.

I am acquainted with a number of allopathic physicians residing in this city, all of them in good standing in their own medical society, who have practically adopted homœopathy.

*Investigator, May 1, 1878.

One of my patients, a mother of several children, resided the past summer with her family thirty miles distant from Albany in the country. She at first expressed unwillingness to take her family so great a distance from reliable homœopathic aid. But, on applying to the allopathic physician, a young man of decided ability residing in the neighborhood, was pleased to find that he carried a case of remedies like those used by homœopaths, and that he prescribed remedies which were quite as pleasant to the taste as any she had ever received from homœopathic sources. When twitted of being a convert to homœopathy, he merely replied. "That the progress of regular medical practice had been very rapid of late years."

The Trustees of the Albany (allopathic) Hospital, recently adopted a resolution allowing physicians of any school the privilege of treating pay patients at the Hospital. The adoption of a provision so eminently just and reasonable is a result of the influence of public sentiment in behalf of *liberty of opinion and action* as against the illiberality and sectarianism of the allopathic school, which, hitherto, has been the principal barrier to the acceptance and adoption of homœopathy on the part of its more candid and unprejudiced members. Viewed in this light, it is a gratifying testimonial to the practical superiority of homœopathic principles.

The time has come, sooner than many of us anticipated, when the so-called regular school refuses longer to discipline those of its members who may adopt and practice homœopathy. This evidence of toleration on the part of that conservative fraternity is highly commendable, and worthy of imitation by our own school. While we rejoice in the promulgation of homœopathic principles, can we not easily perceive in this *coup d'état* an element which will effectually prevent the further growth and prosperity of the homœopathic school as a distinct and influential organization?

Whatever the influences have been which have checked the outward development of homœopathy, it is plainly evident, that the homœopathic school, as regards the number of its openly avowed representatives, has attained its majority, and has begun to decline both in this country and in England.

The February number of the London monthly Homœopathic Review contains the following

significant statement: "The number of those who are ready to assert their confidence in homœopathy, may not have increased of late years, it may possibly have diminished, but that of those who have a confidence in homœopathy which they lack the courage to assert, has increased to an extent we have no means of calculating."

Dr. Drysdale, in the January number of the British Journal of Homœopathy, writes very despondingly: "Our numbers are not only not increasing in proper ratio, not even increasing at all, nay even *actually diminishing*."

Regarding the foregoing quotation, the writer in the Monthly Review offers the following explanation: "To prove his case he (Dr. Drysdale) examines the Homœopathic Directories issued since 1853, and if their contents were any evidence at all, his conclusions would be incontrovertible. But such evidence as they are capable of affording is worthless in endeavoring to estimate the extent to which homœopathy is practiced in this country, or the number of those who, more or less habitually, prescribe homœopathically for their patients."

The doctor then proceeds to relate several instances which have fallen under his own personal observation, of Old School physicians who have practically adopted homœopathy, while still retaining professional good standing in their own medical associations. He then continues:

"We might multiply very many fold such illustrations of the diffusion of homœopathy, of its practice by men never suspected to have adopted it * * * *. That such should be the case is to be regretted chiefly because it shows a weak morale to be more prevalent in the profession than is consistent with the scientific progress of our art. But it is no evidence that the practice of homœopathy has retrograded. On the contrary, it is a step in advance; it represents a period in the history of homœopathy through which it must pass, ere it meet with a general, an acknowledged acceptance throughout the profession."

Dr. Hoyne, in an article read before the Illinois Homœopathic Medical Association, states that the number of homœopathic physicians in Illinois has scarcely increased, perhaps actually diminished during the past five years, while the population of the state, during the same period has more than doubled.

Dr. Bruce, in his directory for 1878, furnishes the names of nine hundred and fifty homœopathic physicians residing in the State of New York. Making allowance for numerous inaccuracies, it is probable that the actual number is not far from eight hundred, a very moderate increase if any, (*Investigator*, Mar. 15, 1878,) perhaps an actual decrease during the past decade; while during the ten years ending July 1875, the population of the state increased twenty-three per cent.

The increase of population in fifteen of the Northern and Eastern counties of the State of New York, during the past ten years, is sixteen per cent., while the number of homœopathic physicians residing in those counties, has not proportionately increased, probably has not increased at all.

Dr. Bruce states in his *Directory*, edition of 1878, that he has the addresses of over 5,000 homœopathic physicians residing in the United States. Dr. Hoynes, in his *Directory* of 1878, also states that he has the addresses of the same number of homœopathic physicians. This is no larger than the estimated number of homœopathic physicians twelve or fifteen years ago.

After a careful examination of the most recent sources of information, we are forced to the conclusion that there is, in all probability, a gradual decrease in the number of homœopathic practitioners, and, if not an actual decrease, that the ratio of increase is far below that of the population in this country.

In view of the foregoing statements, are we not justified in concluding, that the period has at length arrived, for homœopathists to seriously consider whether it is desirable, longer to maintain separate medical organizations and institutions? For, if the powerful influences which are now in active operation continue unchecked will not the efficiency and influence of the homœopathic school, as a distinct body of medical men, be greatly impaired, and its ultimate disintegration merely a question of time?

If it shall be deemed important, on the part of members of the homœopathic school, to maintain separate organizations, it is a matter of very great moment that measures be speedily devised and put in operation by which larger accessions to our ranks may be secured from the younger members of the allopathic school. A large proportion of the older members are zeal-

ous advocates of the allopathic system, and few of them can be induced to adopt homœopathy; but this is not true of the younger members. These constitute the large class who, at the present time, are secretly and openly practicing homœopathy while still retaining membership in allopathic associations.

Let us carefully examine this subject and endeavor to ascertain what motives induce these young physicians to unite with allopathic medical societies. Why do they prefer allopathic fellowship rather than homœopathic? Many of the younger members of the profession have a decided predilection for homœopathy; it is obvious, therefore, that the motives which induce them to unite with allopathic societies are of great influence and power. It is also evident, that membership in homœopathic medical societies is unpopular; and that, in order to turn the tide in our favor, very decided measures must be speedily put in operation. Is it not reasonable to presume that large numbers of physicians who are now practicing homœopathically under allopathic auspices, could be persuaded to unite with homœopathic societies, where they more properly belong, and where they will obtain a clearer and more thoroughly practical knowledge of homœopathy?

In view of the importance of the new and critical situation in which our school is placed, is it not desirable, in fact necessary, that concerted action be taken and that vigorous effort be made to prevent the threatened extinction of homœopathic societies and institutions? Should we not at once open the doors of our medical societies to all educated medical men, and encourage them to unite with and assist us in promoting the advancement of medical science in all its departments? Have we pursued this liberal and unsectarian policy in the past?

Nay more, are we not at the present moment exhibiting a spirit of intolerance by rescinding liberal and unsectarian declarations of faith and practice?

Have we not given medical men to understand that they were not wanted until willing to acknowledge before the public their belief in homœopathic principles? Have we not thereby actually erected a *sectarian barrier* to full professional fellowship, which ought never to have existed, and which is now proving decidedly disadvantageous to the development of our

school, and is rapidly sapping its life blood? Is it wise to longer restrict membership to those physicians only who can accurately pronounce the shibboleth of doctrinal belief?

But this is not all. Have we not, as a school, followed Hahnemann into the mazes of medical transcendentalism? Have we not, and are we not now endeavoring to associate with true homœopathy that which is false, visionary and fanciful? I refer particularly to theoretical errors of the minimum dose and dynamization of medicinal and non-medicinal substances? Although these errors of theory and practice have never been accepted by many homœopaths, yet, having never been discarded by a formal declaration to that effect, have they not largely contributed to the tardy adoption of homœopathic principles?

Ought not these important questions, at this critical period in the history of our school, to be speedily and seriously considered by the whole homœopathic profession?

Editors Hom. Times:

A man believed to have been very wise in his day, is reported to have said: "Answer a fool according to his folly." That injunction is not entirely inapplicable to Dr. Sabin, who has a chronic habit of turning up his classical nose at pretty much everything not original with himself.

Dr. Sabin sits in a fog too dense to permit him to see any difference between live tissue and dead matter; a tissue endowed with powers and capacities for performing physiological and anatomical functions, and a piece of dead inanimate rubber tubing. He expects the latter to exhibit all the powers and functions of the former, and because it fails him in that expectation, *ergo* the whole suggestion is a fraud, and "Dr. Roby is either a fool or a liar."

The Dr. suggests as a philosophical "test" a bullet and a rubber tube. But he entirely overlooks the facts that when the calculus engages in the ureter, that *live* organ labors with a contractile power of several ounces or pounds, perhaps to force *onward* and extrude the foreign body; and this force is expended *behind* the foreign body and not in front of it. When the expulsive power behind the calculus is counterbalanced by the force of resistance, no progress is made in the transit of the stone. But let that

equilibrium of forces be broken by removing part of the resisting force—one or several ounces of atmospheric pressure—and the expulsive force regains the mastery and the stone is extruded.

A rubber tube exhibits no such vital force or function.

But, laying aside all theory or fine philosophy, my article announced a *twice accomplished fact*, and a world of theorizing cannot break the force of an accomplished fact, Dr. Sabin to the contrary notwithstanding.

HENRY W. ROBY.

The regular monthly meeting of the Hom. Med. Society of the County of New York, was held at the Ophthalmic Hospital, Sept, 11th, 1878, the President, Dr. Alfred K. Hills, in the chair, and the Bureau of Obstetrics reported.

Dr. A. M. Pierson, read a paper on Diet and its relations to the pregnant, parturient and puerperal states, gave several cases under his observation, from which he deduced the following:

Women who lived entirely on fruit diet during gestation, would have an easy labor, but the milk would last but ten days, he thought that if the fruit diet, were given the last three months of gestation, it would give an easy labor, and if the osseous diet were immediately commenced after delivery, suppression of the milk could be prevented.

Dr. Danforth, reported a case of miscarriage, followed by Pyemia, Septicæmia, Peritonitis, and Death, caused by the patient probing herself with the nozzle of a syringe, to produce miscarriage. He spoke of a peculiar yellowish-brown, or black color of the skin, and wanted to know what the cause was—Dr. Burdick said it was probably from rapid decomposition of the pelvic organs. Dr. Danforth said that Dr. Schley thought it resembled a severe case of yellow fever. Dr. McMurray asked what remedies were used. Dr. Danforth replied, the common remedies. Dr. McMurray wanted to know if *Ergot* would not produce the discoloration. Dr. Burdick thought it would not, as he had known of continuous massive doses, having been given, and had never seen any effect like it. Dr. McMurray said, according to its pathogenesis, it would produce this discoloration. Dr. Danforth said the discoloration, was due to

the decomposition of the tissue. Dr. McM. wanted to know what caused the effect. Dr. Burdick thought it was caused by killing the fœtus, patient had taken no *Ergot*, that by probing herself after the death of the fœtus, had caused lesions of the mucous membrane, the septic poison being absorbed, produced rapid degeneration and decomposition.

Dr. Wood proposed the following resolution;

Resolved, that a committee of three be appointed, to propose a series of questions to the Southern physicians, as to the origin, nature, course, history, treatment of yellow fever, and success of such treatment, and report the same to the Society in a paper on the subject, and Drs. Wood, Schley, and F. S. Bradford, were appointed.

The Committee were also instructed, to draft a subscription list, for the benefit of destitute Hom. physicians, and their families, if there were any such cases in the South caused by the yellow fever.

Dr. W. M. Pratt read a very interesting paper, entitled "Queries and Answers."

THE BANQUET

which was given to the State Medical Society by the Asylum Trustees in conjunction with the Orange County Medical Society, was a most happy affair and a complete success in every way. The discussion of the bill of fare, which was an extensive one, occupied three full hours, and the speaking continued until midnight. The banquet took place in the main hall, on the first floor of the main or executive building occupied by the officers, in the reception room of which the discussion was held. It was prepared by a celebrated New York caterer, Mr. M. Bergman of Twenty-seventh street and Broadway.

THE TABLE,

which was one hundred and fifty feet long, and would seat one hundred and thirty people, occupied nearly the entire length of the grand corridor, and presented a beautiful and inviting appearance. Elegant silver flower stands, filled with rare exotics from the green house and garden, were seen at frequent intervals, and at every plate a napkin ingeniously folded enclosed a beautiful buttonhole bouquet.

BILL OF FARE.

Oysters on Half Shell.
Soup—Cream Chicken.
Fish—Salmon, Genoese Sauce; Potatoes Parisiennes.
Entrees—Sweet-bread, with Green Peas; Pates Toulouse.
Relève—Filet of Beef, with Mushrooms; Cauliflower, Asparagus; Roman Punch.
Cold Dishes—Mayonnaise of Lobster and Chicken.
Roast—Spring Chicken; Prairie Chicken; Lettuce-Compot.

Dessert—Ice Cream; Figured Charlotte, with Maraschino; Jelly of Rum and Chartreuse; Tarts; Fancy Cakes; Pyramids; Canded, Brandy, Green and Dry Fruit; Mottos; Meringue.
Coffee.

Around the festive board there was a fair sprinkling of fair ladies, female physicians, wives of doctors and Trustees and Asylum officers, and young ladies of the village. Representatives of the *Daily Press* and *Argus*, *Warwick Advertiser*, and *Monticello Watchman*, were present, some of them with their wives. The doctors who sometimes do "disagree," high dilutionists and low dilutionists, and the Trustees, who are not always of one opinion, sat down together in perfect peace and under the softening influence of the society of ladies, and the presence of appetizing viands, passed three busy hours with nothing to mar the pleasure of the occasion. After the banquet, the company was in excellent humor for "the feast of reason and flow of soul" which followed.

THE TOASTS

were announced by Dr. Alfred K. Hills, Secretary of the State Society, and were very appropriate to the occasion. In the absence of Fletcher Harper, President of the Board of Trustees, Vice-President Grinnell Burt presided, filling the bill completely and making a neat and characteristic opening address.

MR. BURT'S REMARKS.

Mr. Burt extended a hearty welcome to the members of the State Society, whose visit, he was sure, would result in what it was intended—a great benefit to the asylum. They came, and with their own eyes saw the institution, and what it is doing for the amelioration of the suffering insane. They must be convinced of its usefulness, of its claims upon their favor, and it must receive their cordial support. The trustees will maintain the integrity of the institution as a homœopathic asylum against all inroads.

The financial management is a success. For the year ending April, 1877, the expenses were \$36,726.74, for an average of 76½ patients, at a cost to each of \$9.31 per week. The expenses for the year ending April, 1878, were \$37,577, for an increased number of 115 patients, at a decreased cost per capita of \$6.25 per week. The institution does not owe a dollar which it cannot pay. It more than pays its running expenses. The time will soon be at hand when it will be pointed to as the model institution of the State, of the country, and of the world. The most pleasant relations now exist between trustees and officers.

He advised the doctors to "pool their issues;" and appealed to them, on their return to their homes, to remember that the New York State Homœopathic Insane Asylum is located at Middletown. He called their attention to the fact that the building for female patients is now full, and in a few months the other building for males will also be full. Another building is an immediate necessity. He asked the physicians to speak to their representatives at home about the appropriation for a new building, which the trustees will ask the legislature for next winter. Mr. Burt's remarks were received with hearty applause.

The toasts were responded to in the following order :
1 The State Homœopathic Asylum for the Insane ; its influence and efficiency are quite apparent.

Responded to by Dr. S. H. Talcott, who spoke as follows :

In response to the toast just given "The State Homœopathic Asylum for the Insane," we can say as Webster said of Massachusetts, "There she stands; she can speak for herself."

Yes! though brief in her existence, and rough the weather she has experienced, she has grown tough and strong even in the face of adverse winds; she has done with the lisping lullabys of weakling infancy; she has thrown off the swaddling clothes of State appropriations for maintenance, and she now stands and walks alone, and proclaims her usefulness in no uncertain numbers. She has, in fact, grown too large for her present wrappings, and needs some elaboration of her wardrobe. I trust that her mother—The Empire State—will appropriate enough during the coming winter to add another border to her phylacteries.

There are weighty reasons why, as homœopaths, we should felicitate ourselves on having in charge a public insane asylum supported by the State. The fact gives rank and standing to the homœopathic profession at large. The opportunity is afforded to develop, in the treatment of a terrible disease, the powers of the healing art, under the homœopathic law of cure. New and untrodden fields of observation, investigation and research are thus opened up for use and cultivation.

But with the privilege comes vast responsibility. This institution is chartered by law as an asylum for the homœopathic treatment of the insane. Common honesty must always impel its managers to see to it that the law granting it life is rigidly enforced, both in spirit and in letter. And it affords me pleasure to state that, so far as my knowledge extends, the trustees in charge do this. Therefore, you may rest assured, my brethren, that this institution is, and will be, what it purports to be—a homœopathic asylum. It is not established to further the interests of any clique or faction, but to illustrate and develop the power of the laws of similars, and to restore the insane to their right minds, through the mild and gentle means which are here employed. Its results will be garnered up for the use of all believers; and the laurels it may win will go to crown with honor and glory the entire homœopathic profession.

In daily practice in our wards we seek to exemplify "the law," as promulgated by Hahnemann, and as interpreted, in these latter days of scientific progress, by the ablest and most impartial of the master minds of our school. In prosecuting this work we are unbound by the fetters of narrow-minded and fanatical attachment to any particular potency; but we sweep the entire gamut of potencies in our endeavor to accomplish the grand object of our efforts—the safe, sure and speedy restoration of the sick to sound and permanent health. We recognize and abide by the fundamental principles of the homœopathic law of cure, the invariable use of the single remedy, the drug to be previously proven upon the healthy, and applied in disease according to the totality of symptoms, both subjective and objective; but we have not pinned our faith to any single potency, whether it be the first, third, thirtieth, or two hundredth. We use such of them, one and all, as each individual case seems to require, and patiently jot down results as far as we are able to ascertain them.

The application of Homœopathy to the treatment of the insane is made in the face of numberless and trying discouragements. We are often forced to grope along a rugged portion of the path, where the light of former experience has never penetrated. No disease is more difficult to comprehend in all its bearings, and in none do we meet with more heart-trying disappointments. In the application of Homœopathic drugs to the ever-varying condition of insanity, we often feel like asserting, in the language of the gardener in Thomson's "Seasons,"

"—Ye little know the care,
The vigilance, the labor and the skill,
Which, day and night, are exercised, and hang

Upon the ticklish balance of suspense."

The great work we have undertaken is but just begun. You should not therefore, my professional brethren, expect or anticipate too much from the Asylum in this comparatively early stage of its existence. All we can say is that the bright promises of its youth are being happily fulfilled, and a golden future, we believe, looms up before it; but the path ahead is not all strewn with roses, and the wheels of progress ever move slowly. Time, patience, and persistent effort are all large factors in the sum of its ultimate success. We beg your forbearance, and we crave your cordial united support.

I remember, when but a very youthful school-boy, hearing William H. Seward, that mighty statesman of the past, plead in behalf of a young, and at that time, almost unknown political party; and the burden and oft-repeated refrain of his speech on that occasion was composed of a few simple but thrilling words which struck me with admiration, and which have clung to my memory ever since. The words, which found a ready response in many American hearts, were these: "All we ask is fair play." Those words of the dead statesman, speaking for a young and feeble party, which afterwards grew to mighty and victorious proportions, I now repeat in behalf of this Asylum. "All we ask is fair play;" and if it is granted, you may rest assured that the tide of our prosperity will move on in majestic volume, like the resistless flow of a mighty river.

It is related of Cornelia, the heroic mother of the Gracchi, that, when asked to display her jewels, she brought in her two boys, glowing with lusty health, and pointing to them with a mother's pride, said "these are my jewels!"

With such a spirit of honest pride should the Homœopathic profession of the Empire State point to this Asylum; for it is indeed a precious jewel in the Homœopathic crown of glory.

And you may rest assured that it shall be our aim, as I believe it is the aim of all who are intimately connected with this institution, to keep that jewel bright and unspotted before the world.

2. The Orange Co. Homœopathic Medical Society.

Its hospitality equal to any emergency.

Responded to by Dr. C. M. Lawrence, of Port Jervis, who wished the duty might have fallen on some other, for instance upon Dr. Ira S. Bradner, the oldest living member of the County Society, who, however, is a "silent member." The Orange County Medical Society was organized in 1853 in the city of Newburgh. Dr. Gerald Hull was the first President. There were only eight members, but some of these removing, the Society after a few feeble years died, and was resurrected again in 1870 at Goshen. "It was a large and respectable gathering," said the rubicund doctor, "I was large, and my friends Bradner and Hotchkiss were eminently respectable." It has since grown in numbers and importance, and much of its strength has lately come from the Asylum in its midst. Homœopathy, he firmly believed, from being the secondary, would become the dominant practice in Orange County.

3. The State of New York—imperial in all things.

The institutions for the relief of suffering scattered over her broad domain are the brightest jewels in her crown.

Responded to by Hon. D. B. St. John of Newburgh, who said he came, not to speak, but to listen and learn of the institution. Of the great Empire State with its

immense canals, railroads and school systems he would not speak, but of its charitable institutions it would be well to say a word. Its asylums for the deaf, dumb, blind, and unfortunate insane are its brightest jewels. He congratulated the profession upon the founding and successful progress of their institution. His first act as a member of the Senate had reference to this institution. The legislation for the charitable institutions of the State had for three years been somewhat directly under his own supervision, and he trusted his course with reference to this asylum had met the approval of his friends. (Applause.) In the future he should stand by it as in the past. He took a deep interest in it, not only as a State affair, but as one concerning closely his own constituency. He congratulated the profession on its success, and was willing to say he would hereafter be found among its friends, as he had been in the past. (Applause.)

3. The Homœopathic Medical Society of the State of New York. Upward and onward; hand in hand with progressive science, is her watchword.

Response by Dr. William Gulick, President. He spoke briefly of what it had done. Organized in 1850, it had established a new degree in medicine, organized a bureau of vital statistics, medical journals, and forty county societies. Its published volumes showed scientific research and valuable discoveries in the science of the healing art.

4. Mental and Nervous Diseases; their subtle influences find their most potent counterparts in *similia similibus curantur*.

Response by Dr. H. N. Guernsey, of Philadelphia. Pennsylvania, he said, comes to New York with kindly greeting. Homœopathy has now a real *Materia Medica*. Its physicians have positive guides in the selection of remedies for diseases, which they can intelligently prescribe. With thorough knowledge of its principles, they can practice with certain success. As to potency, high and low, the hatchet between Pennsylvania and New York is forever buried. [Applause] When the physicians come to know the proper use of homœopathic remedies for mental and nervous diseases, then will the physicians of the Asylum administer them with increasing success.

5. The Ladies; God bless them!—the pioneers in every great work for the relief of suffering.

Responded to by Dr. A. S. Couch, of Fredonia. His speech was full of humor, and was very apropos to the toast. He had studied the subject, he said, from early infancy by a process of "natural selection," and knew, as every man who has been born must know, that woman is the basis of all that we are, and in a Pickwickian sense he might say, in behalf of those recently married, she was the basis of—hopes. He was glad the time had come when all the avenues of learning and science long monopolized by men are open to women, not only in this glorious country but in other lands. By the force of her own energy, at the knock of her own fair hands, the doors of the chief institutions of learning in England, France and Germany, are open to both sexes alike. It will be years before the wisest and best are drawn from their ranks; but the crowning glory will be achieved in her greater sphere at home. He closed

with an apt quotation from Tennyson's "Princess." He was greeted by frequent applause.

6. Our Departed.—Peace attend them!—their virtues should ever remain fresh in our memories.

Silence.

7. Our Medical Colleges; the nurseries of advanced science.

Dr. Dowling, of New York, responded briefly in behalf of the New York Homœopathic Medical College, and spoke of the magnificent institution in which they were gathered as another of which they could well be proud. He paid a warm tribute to Dr. Talcott, who is one of the alumni of the college with which he himself is connected. He expressed his deep sense of gratitude to him, for it was under his kind care that his own sainted father (Rev. Dr. Dowling), recently within these walls, breathed his last.

8. The Press.—The fulcrum for which Archimedes sought in vain to move the world.

This toast was assigned to Mr. M. D. Stivers, of the Press, who excused himself and introduced as a substitute Hon. Geo. M. Beebe of the Monticello *Watchman*, the present representative in Congress from this district. After a graceful introduction, Mr. Beebe spoke of his efforts in behalf of the institution while in the State Legislature, referred to by Mr. Stivers in his remarks, which he said had always been cheerfully given. He gracefully acknowledged the value of the services in a similar capacity by Senator Madden, under whose supervision he worked for the appropriations asked for by the Asylum. He did it because he believed the profession had a right, under the munificence of the Empire State, to a fair show; a right to found such an institution. It is now known as the first institution of its kind in the world; and known by the world wherever science and civilization have made their way. The newspaper press would give them an opportunity to advance their theories and principles. It would not always be fair. It would sometimes assail and criticize them; but it would do them good.

9. Medicine and Surgery; their comparative ages and relationship.

This was responded to in verse by Dr. W. T. Helmutz of New York.

I am a Surgeon, and in making this assertion,

'Tis my apology for doing what I can,

To set aside that undeserved aspersion,

That says medicine is quite as old as man,

Holding within its vast consideration,

All wisdom, knowledge, ethics and decorum,

That Surgery is claimed as is a poor relation,

Being at best the *opprobrium medicorum*.

'Tis certainly a subject for humility,

And one 'tis hard for Doctors to endure,

That they must own their utter inability,

In many cases to effect a cure;

And then with shrugs and sighs their patients urge on,

To give themselves their only chance for life

By calling on the quite forgotten Surgeon,

Who cuts and cures them with the dreaded knife.

But as for age, I'll prove 'tis all a libel.

That statement's bold, but I can make it bolder,

For on no less authority than the Bible,

I'll prove that Surgery is surely older

Than any form of med'cine whatsoever,
 And having finish'd will appeal to the majority,
 To have the point adjusted now forever,
 That Surgery in age can claim priority.
 'Tis true, the snake arou ed the curiosity,
 And gave to Eve the apple fair and bright—
 She ate, and with a fatal generosity.
 Inveigled Adam to a luscious bite;
 That from that time disease and suffering came;
 Doctors were called upon to cure the evil.
 The art of healing then, with all its faune,
 Was at the first developed by the devil.
 Med'cine thus stands co-evil with the sinning,
 Of Mother Eve, fair creature, tho' quite human,
 While noble Surgery had its beginning
 In Paradise, before there was a woman.
 The facts are patent, and we all agree,
 'Twas Satan laid on man the direful rod;
 That Doctors are the devil's progeny,
 While Surgeons come directly down from God.
 For thus we read—altho' the analgesia
 Of Richardson was then entirely unknown—
 Adam profoundly slept with anaesthesia,
 And from his thorax was removed a bone.
 This was the first recorded operation,
 No Doctor here dare tell me that I fib,
 And Surgery thus early in creation
 Can claim complete excision of a rib.
 But this is nothing to the obligation,
 The world to Surgery must ever own,
 When women, loveliest of the creation,
 Grew and developed from that very bone.
 Then love-sick swains began inditing sonnets,
 And Fashion talk'd with Folly by the way,
 Then came bulimia for becoming bonnets,
 Hereditary epidemic of to-day.
 Then, too, began these endless loves and frolics
 That poets sing in sweet and low refrains;
 Doctors grew frantic o'er infantile colics,
 Announced at midnight with angelic strains.
 From this the world was peopled—so, Doctors, own,
 While you lay claim to such superiority,
 That Surgery, in the development of bone,
 As well as age, can clearly claim priority.
 My task is done, and with my best endeavor,
 I have essayed to vindicate my art—
 So list my friends, ere friendly ties we sever,
 While waning moments bring the hour to part—
 Whatever land, whatever clime may hold you,
 Sometimes give honor to the bright scalpel;
 And when you recollect what I have told you,
 Remember me—'tis all I ask—farewell!

The following toasts in the programme were omitted for the lateness of the hour :

10. Our Civil Relations—Dr. H. M. Paine.
11. One of the Pioneer States in Homœopathy ; the State of New Jersey—Dr. J. J. Youlin.
12. The Progress of Homœopathy; she still keeps pace with advancing civilization—Dr. H. D. Paine.
13. Our Cause; the noblest and grandest of them all—Dr. E. Guernsey.

Dr. Lawrence proposed as a volunteer toast. "The health of Ex-Senator Madden, to whom the Institution owes so much."

Mr. Madden briefly responded in his usual forcible style and made some plain and pertinent remarks. As a Senator, he did all he could for the Asylum. The opposition it had met with in the past was not because of its school, but the question was "can the State afford the expense?" The State can afford the expense,

and it has poured out its money like water for this and all institutions of a philanthropic nature. "If it does not succeed, it is your fault, gentlemen," he said, "and not hers." Such institutions, however, must be managed on a business basis. That was why he had struck for a local Board of Trustees of business men, in place of a board of physicians scattered all over the State. He was glad the point was gained.

The trustees are well known, honorable business men, who conduct the financial affairs of the Asylum properly and on business principles; and who will not interfere with the medical treatment, except to see that its integrity as a Homœopathic institution is preserved.

AFTER THE BANQUET

many of the guests were sent in the Asylum carriages to the hotels in the village, and some were entertained at the Asylum by the officers. Mrs. Dr. Talcott and Mrs. Dr. Butler, as well as their husbands, did everything in their power to make the visiting physicians and all the guests at home, and contributed largely to the success of the banquet.

The object of the Trustees in inviting the society to meet at the Asylum, which was to make their acquaintance with its workings, has been fully realized and cannot be without good fruits.

The opinion appeared to prevail among the members of the State Society that Dr. Talcott is the right man in the right place, as Superintendent, and that he is ably supported by his associates, Drs. Butler, Paine and Horton. The papers of the medical faculty of the Asylum were received with very marked approval.

In closing our account of this happy and fruitful meeting, we feel impelled to state that the arduous duties of Society Secretary were performed with great zeal, impartiality, thoroughness and vigor, by Dr. Alfred K. Hills, of New York. To his persistent efforts are due in a large degree the number and variety of papers presented; for, in his quiet, persuasive way, Dr. Hills had labored for months with the profession, urging them to furnish articles of a scientific and progressive nature. His labors have been rewarded by well earned success.
 —[Extracted from Middletown Daily Press.]

A PATIENT'S OPINION OF THE MIDDLETOWN ASYLUM

AND ITS MANAGEMENT UNDER DR. TALCOTT.

The following extract from a letter written by a convalescent patient in the Asylum at this place—who was formerly connected with the newspaper profession—to a friend at home, showing, as we are sure it does, the estimate which those most interested—the patients themselves—have of Dr. Talcott's management of the institution, may be of interest to our readers:

MY DEAR JUDGE:

* * * * * You will, I presume, having read and heard my animadversions on the asylum at—, have some interest to know what I think of this institution. You will remember my saying to you that, if you should have a friend whom you loved become insane, I begged of you not to send him or her to an asylum, if there was any possibility of the patient's remaining under private treatment. Well, my experience here al-

ready confirms that opinion, so far as it was based on my knowledge of the asylum at,—under Dr.—'s management. Things are so radically different, and so eminently right and humane here, that the neglect, discourtesy, discomfort and humiliation which patients at— have to undergo, seem doubly magnified by comparison, and my bump of combativeness swells with indignation whenever I think of what I saw at—

Here, the kindness of the medical officers is real, and goes way beyond the mere care that patients are properly fed, lodged, bathed, &c. They give patients sympathy and encouragement, such as you or any kindly disposed person would give to a friend in ordinary sickness. This kindness, too, comes so evidently from the unrestrained sympathetic character of Doctor Talcott, the Superintendent, that it has spread like a blessed contagion over the whole establishment, until there is an enthusiastic *esprit du corps* among his subordinates, in which all devote themselves to the happiness and welfare of the inmates, and whenever a patient shows signs of recovery, congratulations and satisfaction are expressed on every hand. A notable result of this state of things, and one I believe to be found in no other insane retreat in the world, is an almost total absence of that touching, hopeless sadness among the patients, which is the rule in all other asylums of which I have any knowledge. You know, from what I have told you, how utterly devoid the hospital at — is of any curative appliances in the way of furniture or household goods of any description, and will be surprised and pleased when I tell you that even those who have come from the luxuries of well-ordered and happy homes, and the ministrations of loving wives, mothers or sisters, find here a degree of home-like surroundings and attentions which may be said to make it a home in the best sense, and would seem almost impossible in a public institution, and which I am sure has never been attempted in the management of any other insane asylum. * *

* * *—[Daily Press.]

Of the text books in Physiology, the most bulky is Carpenter's. It resembles some old houses. As the owner's means grew, and his tastes and desires developed, he made addition after addition. You will find in it the substantial central house, in old-fashioned style and very attractive, in spite of modern comforts and conveniences. In newer parts, gas and water have been introduced, and more scientific arrangements have been made for heating, ventilating, lighting, &c. The latest additions show high-studded rooms, large, elegant windows, and all the modern improvements. It is all there, but you will learn your way around and become familiar with a small house in less time. So Carpenter's Physiology has with each new edition, been enriched by large and important additions and emendations, and all it contains is in itself of value; but few students will have the patience to read it through.

Flint's larger work in Physiology, in five volumes, contains a mass of references and bibliography which are of no use ordinarily; while the text was written before much now found in Flint's Text-Book had been accepted by the author.

Flint's Text-Book is a splendid work. If the author were a better Histologist and a better Scientist, and were better acquainted with German writers, his work would have been made more valuable. As it is, it needs revision, in order that new material which now belongs to the whole medical fraternity may be incorporated in it. This will be done so soon as the profession realizes

its own wants. Unless this is done, the book must lose its place as the best text-book in a short time. It is a truly American book, making science easy and popular, and will not be easily supplanted.

In Dalton's Human Physiology, the first section designated "Nutrition," is very antique. The second section, "The Nervous System," is very good, although it too needs modernizing. The third section, "Generation," is an excellent article, and is almost entirely the result of original investigation and discovery; but it is better adapted to show what the author has done and how, than to impress clear, distinct ideas of this now so important subject. The book would do for a student in an academy, but not for a man about to graduate in medicine.

The book of Küss is an admirable little treatise. It commends itself to the practitioner desiring to see for himself how Physiology has been affected by recent advances in science. It is an admirable first book for the student. It is too small to contain all he should know on this subject; and, although it furnishes a compendious view of the whole subject in its present advanced condition, should not be the only book of the student, because much is entirely left out the ignorance of which would leave the young practitioner unable to appreciate what he would find written and spoken of in professional circles.

Foster's Physiology I have not read, through, and do not speak of it with the same assurance as I do of the above. It seems to be fully up to the present condition of the subject; but is too concisely and scientifically written. It makes the subject more difficult than it need be, and addresses itself only to minds already well-trained, and therefore does not adapt itself to the use of the classes in our medical schools. It is now imported in such a way that it costs less than a dollar more than Flint's Text-Book. C. A. B.

ERRATA.—In our last issue, page 148, line 31, for *similularium*, read *simuludacrum*.

BRAIN STIMULANT.—The best possible thing for a man to do when he feels too weak to carry anything through, is to go to bed and sleep as long as he can. During sleep the brain is in a state of rest, in a condition to receive and appropriate particles of nutriment from the blood which take the place of those which have been consumed by previous labor, since the very act of thinking burns up solid particles, as every turn of the paddle-wheel or screw of the steamer is the result of consumption by fire of the fuel in the furnace. The supply of consumed brain substance can only be had from the nutritive particles in the blood which were obtained from the food eaten previously, and the brain is so constituted that it can best receive and appropriate those nutritive particles during the state of rest, of quiet and stillness of sleep. Wine-stimulants supply nothing in themselves; they goad the brain, force it to a greater consumption of its substance, until it is so exhausted that there is not power enough to receive a supply.

Medical Items and News.

THE ENGLISH MEDICAL ACT.

"In case it shall appear to the General Council that an attempt has been made by any Body entitled under this Act to grant qualifications, to impose upon any candidate offering himself for examination, an obligation to *adopt or refrain from adopting, the practice of any particular theory of Medicine or Surgery, as a test or condition of admitting him to examination, or of granting him a certificate, it shall be lawful for the said Council to represent the same to Her Majesty's most honorable Privy Council, and the said Privy Council may thereupon issue an injunction to such Body so acting, directing them to desist from such practice; and in the event of their not complying therewith, then to order that such Body shall cease to have the power of conferring any right to be registered under this Act, so long as they shall continue such practice.*"

Let our Committee on Legislation see to it that a similar Act is introduced to our next legislature.

Messrs. Wm. Wood & Co., of 27 Great Jones street, this city, the enterprising publishers of medical works, propose commencing with 1879, the publication of "Wood's Library of Standard Medical Authors," embracing articles by the most eminent medical specialists, to be issued monthly, at the low rate of \$12 per year.

Each volume will contain from 250 to 300 pp., and will cost \$1, to be had *only* upon the annual subscription.

The following announcement of contents has been made:

"Rest and Pain," by John Hilton, F. R. S.
"Diseases of the Intestines and Peritoneum."
Compiled.

"Diseases of Children," by Edward Ellis, M. D.

"Diseases of Women," by Lawson Tait, F. R. C. S.

"Diseases of the Liver," by F. T. Frerichs, M. D.

"Infant Feeding and its Influence on Life," &c., by C. H. F. Rourt, M.D.

As the title indicates, it will truly constitute a "library." We advise our readers to send to

the publishers for their prospectus and subscribe at once.

We have received advanced sheets of "The Guiding Symptoms of our Materia Medica. By C. Hering, vol. I, Phila., American Hom. Pub. Society, 1878," from which we can observe the admirable arrangement of this *life-work* of the master. His "Condensed Mat. Med." was *universally* approved, and this work will be far superior to that.

As the book can only be had *at cost* by the stockholders of the Pub. Co., we advise our readers to at once communicate with Dr. Thos. Moore, Treas.

The Hom. Hosp. College of Cleveland, requests us to state that it opened its Winter session at the appointed date, and with an unusually large attendance.

REMOVALS.—DRS. R. & S. A. Harris, from Perth Amboy, N. J., to 202 W. 38th st., New York.

Dr. E. P. Fowler, to 10 East 41st st., in association with Dr. John C. Minor.

Dr. Clarence E. Beebe, to 21 W. 37th st.

Dr. Wm. M. Pratt, to 131 East 58th st., office also 278 E. Broadway.

Dr. Louise Gerrard, to 17 East 44th st.

Dr. Alice A. Stoddard has settled at Rochester, N. Y.

Dr. J. Lester Keep has been promoted to the position of Surgeon to the Second Division, N. G., General Jourdan commanding.

Dr. Holcombe writes from New Orleans: "We are overwhelmed with hard work. I think we are doing well for the cause. My own average mortality will not exceed ten (10) per cent.

Death rate Hom. Hosp., W. I., for Sept., 3.33.

BROOKLYN HOM. HOSP. DISPENSARY.

During the month of August there were prescribed for at the Dispensary, 722 new patients; at own homes, 56; total, 778. Closed for repairs two weeks during month.

G. LOUNSBERY, M. D.,

WANTED.—A practice or partnership in New York or Brooklyn. Address "Buyer," Homoeopathic Times office.

FOR SALE.

I would dispose of my house and lot at a fair price to any good Homoeopathic physician, with practice and good-will thrown in. Situated in a beautiful College Town of 4000 people. To any physician having a family to educate, and desiring at the same time a *good practice*, this is a rare chance. No other Hom. physician within nine miles. Satisfactory reasons for selling. For particulars address "H," at Hom. Times office.

Crystal Chloride of Kalium Solution

IS not the result of artificial manipulation in the laboratory of the chemist, but a preparation from a natural mineral salt, which, with all its properties of acknowledged medicinal efficacy, has for ages been stored in the depths of the earth to wait discovery and application to the necessities of mankind.

It not only gives prompt relief from the irritability of acute congestion, but, in chronic cases of diseased mucous membrane, will, by its gentle stimulating and astringent qualities, invigorate the parts affected, promote their healthy action, arrest morbid discharges and restore the normal secretions. **Endorsed by the Medical Profession.**

A NEW YORK PRACTITIONER OF LARGE EXPERIENCE, AFTER REPEATED TRIALS, REPORTS: "In a variety of skin diseases of a dry and non-suppurating character, and in old ulcers it has worked well. In all catarrhal affections, and in Acne, Rosacea, it has given great relief, and produced marked cures where the usual remedies had failed. In cases of Rupia Prominens, it immediately changed the character of the secretions, and in a few days afforded decided relief. The results have been far beyond my expectations, and I cheerfully recommend it to the profession as an article of great merit."

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Oxide of Iron.....	2.08.
Bromides and Iodides.....	2.03.
Water.....	17.63.

100.00. In solution 30° gravity.

GERMAN BATHING SALT is a mineral deposit, and the most wonderful natural specific known for mild cutaneous diseases and all conditions of the body where the bath is prescribed. It is invaluable for children—strengthening the body, exciting the appetite and is a potent agent in the relief of Malarial Complaints.

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SCOTT'S EMULSION

PURE COD LIVER OIL

WITH
HYPOPHOSPHITES OF LIME AND SODA

PERFECT, PERMANENT, PALATABLE.

FORMULA.—50 per cent. of pure Cod-Liver Oil, 6 grs. of the Hypophosphite of Lime, and 3 grs. of the Hypophosphite of Soda, to a fluid ounce.

We respectfully submit the following facts to the medical profession, and ask their careful consideration:

First.—We overcome by our process of Emulsifying and preparing the oil, its nauseous and disagreeable properties, rendering it so palatable that it can be taken and retained by children and persons of the most sensitive stomach.

Second.—The Emulsion is perfectly made, the Hypophosphites being so incorporated with the oil that they form a union perfectly compatible; and combined in this way, they are both more easily digested and appropriated than in their natural state.

Third.—The Emulsion is **ABSOLUTELY PERMANENT**, remaining for years in any climate, if not exposed to the air or intense heat, without the slightest separation or change (which we believe is not true of any other similar preparation).

And we most respectfully ask those who have never prescribed it, or seen its results, to give it a trial, and if they do not admit its superiority over plain Cod-Liver Oil, or any combination they have ever used in pulmonary troubles, scrofula, and all wasting diseases, we will not ask for a continuance of their patronage. It is sold by nearly all druggists. But, if you desire a personal inspection of the Emulsion before prescribing it, we will be pleased to send you a 4 oz. sample by express (prepaid).

SCOTT'S EMULSION is one of the best in market of the many preparations of Cod-Liver Oil with Hypophosphites of Lime and Soda. It is agreeable to the taste, does not offend the stomach, and highly beneficial in its results.

Messrs. SCOTT & BOWNE:—It gives me pleasure to say that I have used your Emulsion of Pure Cod-Liver Oil with Hypophosphites for about two years with the most satisfactory results. I have found it especially useful in cases of anemia and feeble women of consumptive tendencies; and for delicate teething children it is an excellent tonic.

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For the application of Muriate of Ammonia (fumes) and volatile remedies to the Nasal Cavities, Throat, and Lungs, for the cure of Catarrh, Sore Throat, or any inflammation of the air-passages. By the use of

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The Salt Ammonium Muriate can be applied to the diseased portions of the Lungs, Throat and Nasal Cavities, either in a state of purity, or combined with other remedies. It can be used also, for an inhalant of any kind, without the Ammonium Muriate. This Salt being in the condition of vapor, can be readily carried to all parts of the respiratory organs by inhalation, and quickly dissolved by the natural moisture of the part, causing a healing effect impossible to be obtained in any other way. This mode of treatment for Catarrh, Sore Throat, &c., has been in use for years, and is recommended by many eminent physicians.

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Are **Low Price, Simplicity of Construction, Compactness, Superior Quality** of material used in its manufacture.

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WHEAT FOOD.

A Nutritious Diet for Infants and Invalids.

"Wheat Contains the elements more nearly corresponding with the requirements of the human system than any other grain, and is therefore the very best food."

This article is a true extract of Choice Wheat prepared by an approved process, thereby retaining all the nutritive constituents and rejecting those which are irritating or otherwise objectionable to a delicate system. It contains more of the Nitrates and Phosphates (muscle and bone forming elements) than most Farinaceous foods and proper proportion of the Carbonates (flesh and fat producing elements.) It is thoroughly cooked, which produces both physical and chemical changes, the tendency of which is to facilitate mastication and the subsequent action of the fluids of the stomach, thus rendering it more easily digested. This article, containing all the nourishing and strengthening properties of choice wheat in a form so acceptable, is the

VERY BEST FOOD FOR INFANTS.

We recommend our **Wheat Food** in the various forms of disease caused by imperfect or enfeebled digestion, and it has been found especially beneficial in Intestinal diseases (Dysentery, Cholera Infantum, &c.) This **Wheat Food** is acceptable to the most delicate and can be prepared for use in a short time, which is very important in supplying the ever changing tastes of the invalid.

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Löeflund's Concentrated Extract of Malt is a *Resolved Emollient* and a most powerful *Nutrient*. It is used for diseases of the *respiratory organs pulmonary complaints*, and for diseases originating in *imperfect digestion*.

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Long experience in manufacturing Malt Extract has enabled us to completely overcome the many difficulties attending its manufacture in large quantity; and we positively assure the profession that our Extract of Malt is not only perfectly pure and reliable, but that it will keep for years, in any climate, without fermenting or molding, and that its flavor actually improves by age. Our Extract is guaranteed to equal, in every respect, the best German make, while, by avoiding the expenses of importation, it is afforded at less than half the price of the foreign article.

The Malt from which it is made, is obtained by carefully malting the very best quality of selected Toronto Canada Barley. The Extract is prepared by an *improved process*, which prevents injury to its properties or flavor by excess of heat. **It represents the soluble constituents of Malt and Hops**, viz.: MALT SUGAR, DEXTRINE, DIASTASE, RESIN and BITTER OF HOPS, PHOSPHATES OF LIME and MAGNESIA, and ALKALINE SALTS.

Attention is invited to the following analysis of this Extract, as given by S. Douglas, Professor of Chemistry, University of Michigan, Ann Harbor.

TROMMER EXTRACT OF MALT CO.:—I enclose herewith my analysis of your Extract of Malt:

Malt Sugar 46.1; Dextrine, Hop-bitter, Extractive Matter, 23.6; Albuminous Matter (Diastase), 2.469; Ash—Phosphates, 1.712. Alkalies .377; Water, 25.7. Total, 99.958.

In comparing the above analysis with that of the Extract of Malt of the German Pharmacopœia, as given by Hager, that has been so generally received by the profession, I find it to substantially agree with that article.

Yours, truly,

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This invaluable preparation is highly recommended by the medical profession, as a most effective therapeutic agent, for the restoration of delicate and exhaustive constitutions. It is very nutritious, being rich in both muscle and fat producing materials.

The very large proportion of *Diastase*, renders it most effective in those forms of disease originating in *imperfect digestion of the starchy elements of food*.

A single dose of the **Improved Trommer's Extract of Malt**, contains a larger quantity of the active properties of Malt, than a pint of the best ale or porter; and not having undergone fermentation, is absolutely free from alcohol and carbonic acid.

The dose for adults is from a dessert to a tablespoonful three times daily. It is best taken after meals, pure, or mixed with a glass of milk, or in water, wine, or any kind of spirituous liquor. Each bottle contains ONE and ONE-HALF POUNDS of the Extract.

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Extract of Malt, with Hops (Plain),.....	\$1 00	Extract of Malt, with Hypophosphites,.....	\$1 50
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TROMMER EXTRACT OF MALT COMPANY,
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MALTINE.

Extract of MALTED, BARLEY, WHEAT and OATS.

THIS PREPARATION CONTAINS

From Three to Five Times the Medicinal and Nutritive Elements found in EXTRACT OF MALT.

MALTINE is a highly concentrated extract of malted Barley, Wheat and Oats, containing, undiminished and unimpaired, all the medicinal and nutritive principles found in these cereals. By the most carefully conducted scientific process we are enabled to offer to the medical profession a perfect article, possessing from three to five times the therapeutic and nutritive merit of any foreign or domestic Extract of Malt.

In support of our claims we invite the attention of the profession to the following points, viz:

FIRST: In the manufacture of **MALTINE** the evaporation necessary to reduce it to its great density is conducted in vacuo at a temperature ranging from 100 deg. to 120 deg. Fahr; while most manufacturers of Extract of Malt resort to "open pan" or low pressure steam boiling, by neither of which processes can the extract be so produced as to preserve the Diastase, Phosphates and Albuminoids on which its remedial value so greatly depends, and the product is either of a dark color or of low specific gravity, possessing little virtue aside from the saccharine matter which it contains.

SECOND: Carbon, Hydrogen, Nitrogen, Phosphorus, Sulphur, Iron, Magnesium and Potassium are essential elements in the food of man; and it is only in **MALTINE**, containing the combined properties of malted Barley, Wheat and Oats that all these principles can be found in the proper proportions; Extract of Malt made from Barley alone is wanting in some of the most important of these elements.

THIRD: Gluten is most nutritious principle found in these cereals, and the only vegetable substance which will, alone, support life for any great length of time. It is composed of three distinct nitrogenous principles, together with fatty and inorganic matters, and is analogous to animal fibrin. **MALTINE** contains twenty times the quantity of Gluten found in any Extract of Malt.

FOURTH: LIEBIG says, "Wheat and Oats stand first among our list of cereals in combining all the elements in proportions necessary to support animal life. They are especially rich in muscular and fat producing elements." The only reason we use Malted Barley in the manufacture of **MALTINE** is that it contains larger proportions of mineral matters (bone producers,) and Diastase. It is deficient in all other essential elements.

We believe that any practitioner will readily recognize the superiority of **MALTINE**, and would request a trial and comparison of merits with any article offered for similar uses.

MALTINE AND ITS COMPOUNDS.

Can undoubtedly be used with greater success than any other remedy now known, in cases of General and Nervous Debility.

Indigestion, Imperfect Nutrition and Deficient Lactation; Pulmonary Affections, such as Phthisis, Coughs.

Colds, Hoarseness, Irritation of the Mucous Membranes, and Difficult Expectoration; Cholera

Infantum, and Wasting Diseases of Children and Adults; Convalescence from Fevers, and

whenever it is necessary to increase the vital forces and build up the system.

WE Manufacture the following preparations, the formulas and doses of which are given in our Dose Books and on the Label attached to each bottle:

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MALTINE, FERRATED:

This combination is specially indicated in Anæmia and Chlorosis, and all cases of defective nutrition where Iron is deficient in the system.

MALTINE WITH PHOSPHATES, IRON AND QUINIA;

A powerful general and nutritive tonic.

MALTINE WITH PHOS. IRON, QUINIA AND STRYCHNIA:

A powerful nutritive, general and nervous tonic.

MALTINE WITH HYPOPHOSPHITES:

This preparation is specially indicated in Phthisis, Rickets and Deficient Ossification.

MALTINE WITH PEPSIN AND PANCREATINE:

One of the most effective combinations in Dyspepsia, Cholera Infantum and all diseases resulting from imperfect nutrition. It contains three of the all-important digestive agents, Diastase being one of the constituents of the **MALTINE**. We believe there are few cases of Dyspepsia which will not readily yield to the medicinal properties of the above combination, while the system is invigorated by its nutritive qualities.

MALTINE WITH BEEF AND IRON:

One of the most valuable combinations in cases of general debility when there is deficient nutrition and a deficiency of Iron in the system.

MALTINE WITH COD LIVER OIL:

The most perfect emulsion, and most agreeable and effective mode of administering this nauseous but valuable Oil yet discovered.

MALTINE WITH COD LIVER OIL AND PHOSPHORUS:

In this combination the Phosphorus has no irritant effect upon the stomach.

MALTINE WITH COD LIVER OIL AND IODIDE OF IRON:

This is prepared with the tasteless Iodide of Iron, which undergoes no chemical change from contact with the Oil, and does not blacken the teeth.

MALTINE WITH ALTERATIVES:

In this preparation **MALTINE** is combined with the most valuable Alteratives known, such as Iodides, Bromides and Chlorides, and will fully meet the requirements of the practitioners in Syphilis, Scrofula, and all depraved conditions of the blood.

Each fluid ounce contains: Chloride, Calcium 10 grains; Chloride Magnesium, 10 grains; Bromide Sodium, 5 grains; Iodide Potassium, 1 grain; Iodide Iron, ¼ grain. Dose, One teaspoonful to one tablespoonful.

We also manufacture a perfectly prepared EXTRACT OF MALT, from Barley only.

MALTINE preparations are sold at the same prices as EXTRACT OF MALT and its combinations, and are put up in amber bottles holding sixteen fluid ounces, each bottle inclosed in a folding paper box.

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The **FIBRIN** and **WHEAT** is prepared for conditions of greater debility, and by the process of semi-digestion, is fitted for the delicate and diseased stomach.

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